NOTE

Under Internal Revenue Regulations, tax-exempt charitable organizations generally must provide requesters with COPIES of:

- Its approved exemption applications, all required attachments and any related correspondence with the IRS, and
- Its three most recent annual information returns (Form 990), including all schedules and attachments (but not the names and addresses of contributors).

**In-person requests:** A member of the public may request to inspect the documents at any principal office of the organization. The entity must provide the information requested that same day. However, if the request places an “unreasonable burden” on the organization, the staff must provide copies of the requested information no later than the next business day after the unusual circumstances cease to exist (limited to a maximum of five business days after the request).

**Written requests:** Written requests made by fax, mail, email, or overnight service, which include the requester’s address, must be honored within 30 days of receipt.

**Website alternative:** Instead of providing copies, an organization may make the documents available on either its own or another organization's website. If it uses this option, it has to: (1) provide an exact replica of the document as was filed with the IRS; (2) advise requesters how to access the forms on the web; (3) the site should charge no access fee and require no special software or hardware to download. Organizations that post this information on the Internet still must honor in-person requests to view the applicable documents.

**Permissible charges:** Tax-exempt organizations may charge a reasonable copying fee, up to $1 for the first page and 15 cents for each additional page, plus actual postage costs.

**Penalties:** An organization that fails to comply with the new disclosure requirements may be subject to the following penalties:

- Annual Information Return – Form 990 - $20 per day for as long as the failure continues, up to a maximum of $10,000 for each failure to provide an annual return.
- Exemption Application - $20 per day with no maximum.
- An organization that willfully fails to comply with these public inspection rules can be subject to an additional $5,000 penalty.

**Private foundation exempt:** The new disclosure rules don’t yet apply to private foundations. They must still make a copy of their annual return available for public inspection at their principal office for a period of 180 days after publishing a notice of availability.

**Donor Information:** Please note that donor information is not open to public inspection and has been excluded from this copy.
Return of Organization Exempt From Income Tax

For the 2019 calendar year, or tax year beginning OCT 1, 2019 and ending SEP 30, 2020

** Christian Herald Association, Inc. **

<table>
<thead>
<tr>
<th><strong>Part I</strong></th>
<th><strong>Summary</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Briefly describe the organization’s mission or most significant activities: Minister to those in poverty cycles &amp; see their lives transformed to eternal life through Christ.</td>
<td></td>
</tr>
<tr>
<td>2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.</td>
<td></td>
</tr>
<tr>
<td>3 Number of voting members of the governing body (Part VI, line 1a) 15</td>
<td></td>
</tr>
<tr>
<td>4 Number of independent voting members of the governing body (Part VI, line 1b) 14</td>
<td></td>
</tr>
<tr>
<td>5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 141</td>
<td></td>
</tr>
<tr>
<td>6 Total number of volunteers (estimate if necessary) 13524</td>
<td></td>
</tr>
<tr>
<td>7a Total unrelated business revenue from Part VIII, column (C), line 12 0.</td>
<td></td>
</tr>
<tr>
<td>7b Net unrelated business taxable income from Form 990-T, line 39 0.</td>
<td></td>
</tr>
</tbody>
</table>

| **Revenue** |
| 8 Contributions and grants (Part VIII, line 1h) |
| 9 Program service revenue (Part VIII, line 2g) |
| 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) |
| 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) |
| 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 17,386,431. 30,081,547. |

| **Expenses** |
| 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) |
| 14 Benefits paid to or for members (Part IX, column (A), lines 4) |
| 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 9,622,527., 9,990,943. |
| 16a Professional fundraising fees (Part IX, column (A), line 11e) 248,859., 729,323. |
| b Total fundraising expenses (Part IX, column (D), line 25) 5,211,851. |
| 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 9,883,966., 10,974,376. |
| 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 22,439,035. 26,845,061. |
| 19 Revenue less expenses. Subtract line 18 from line 12 5,052,604. 3,236,486. |

| **Net Assets or Fund Balances** |
| 20 Total assets (Part X, line 16) 33,230,702. 36,291,660. |
| 21 Total liabilities (Part X, line 26) 7,852,976. 7,445,682. |
| 22 Net assets or fund balances. Subtract line 21 from line 20 25,377,726. 28,845,978. |

**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.

Signature of officer: Robert P. Depue, CFO/Treasurer

Date: 8/5/2021

Preparer's signature: Sara Tibbott

Date: 8/5/2021

Preparer's EIN: 36-3990892

Phone no.: 505-502-2746

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

LHA For Paperwork Reduction Act Notice, see the separate instructions.
Christian Herald Association (CHA), doing business as The Bowery Mission, has served New Yorkers in need since 1879. Our goal is simple: To be the most effective provider of compassionate care and life transformation for hurting people in New York City. (See Sch O)

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes  No

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.

The Bowery Mission has always stood with the most vulnerable New Yorkers in times of crisis. In fiscal year 2020, we continued to stand with those who were newly unhoused, food insecure, or unemployed due to COVID-19--never missing one day of service. In total, the organization successfully provided 429,500 meals, 104,000 nights of emergency shelter, and 27,600 articles of clothing to New Yorkers experiencing homelessness. Among all overnight shelter guests served, more than 740 met with a Clinical Ambassador (case manager) to complete a Needs Assessment for further care. In the same time period, The Bowery Mission served 321 unique adults through its Residential Programs.

The Bowery Mission’s Children’s Programs, Mont Lawn Camp and City Camp, provide year-round mentoring and enrichment opportunities for youth living in underserved communities. In fiscal year 2020, The Bowery Mission served 225 children and youth through its Mont Lawn City Camp program. Of these children and youth, 119 children and youth participated in virtual programming during COVID-19. In total, 158 families received some form of supportive care during the fiscal year.

Other program services (Describe on Schedule O.)

Total program service expenses $20,109,811.
<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>1</td>
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<td>20b</td>
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<td>21</td>
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<td>X</td>
</tr>
</tbody>
</table>
## Part IV Checklist of Required Schedules (continued)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule I, Parts I and III</td>
<td>22</td>
<td>X</td>
</tr>
<tr>
<td>23 Did the organization answer &quot;Yes&quot; 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 &quot;Yes,&quot; complete Schedule J</td>
<td>23</td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; answer lines 24b through 24d and complete Schedule K. If &quot;No,&quot; go to line 25a</td>
<td>24a</td>
<td>X</td>
</tr>
<tr>
<td>b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</td>
<td>24b</td>
<td></td>
</tr>
<tr>
<td>c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?</td>
<td>24c</td>
<td></td>
</tr>
<tr>
<td>d Did the organization act as an &quot;on behalf of&quot; issuer for bonds outstanding at any time during the year?</td>
<td>24d</td>
<td></td>
</tr>
<tr>
<td>25a <strong>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</strong> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If &quot;Yes,&quot; complete Schedule L, Part I</td>
<td>25a</td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule L, Part I</td>
<td>25b</td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule L, Part II</td>
<td>26</td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule L, Part III</td>
<td>27</td>
<td>X</td>
</tr>
<tr>
<td>28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):</td>
<td>28</td>
<td></td>
</tr>
<tr>
<td>a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If &quot;Yes,&quot; complete Schedule L, Part IV</td>
<td>28a</td>
<td>X</td>
</tr>
<tr>
<td>b A family member of any individual described in line 28a? If &quot;Yes,&quot; complete Schedule L, Part IV</td>
<td>28b</td>
<td>X</td>
</tr>
<tr>
<td>c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If &quot;Yes,&quot; complete Schedule L, Part IV</td>
<td>28c</td>
<td>X</td>
</tr>
<tr>
<td>29 Did the organization receive more than $25,000 in non-cash contributions? If &quot;Yes,&quot; complete Schedule M</td>
<td>29</td>
<td>X</td>
</tr>
<tr>
<td>30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If &quot;Yes,&quot; complete Schedule M</td>
<td>30</td>
<td>X</td>
</tr>
<tr>
<td>31 Did the organization liquidate, terminate, or dissolve and cease operations? If &quot;Yes,&quot; complete Schedule N, Part I</td>
<td>31</td>
<td>X</td>
</tr>
<tr>
<td>32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If &quot;Yes,&quot; complete Schedule N, Part II</td>
<td>32</td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule R, Part I</td>
<td>33</td>
<td>X</td>
</tr>
<tr>
<td>34 Was the organization related to any tax-exempt or taxable entity? If &quot;Yes,&quot; complete Schedule R, Part II, III, or IV, and Part V, line 1</td>
<td>34</td>
<td>X</td>
</tr>
<tr>
<td>35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?</td>
<td>35a</td>
<td>X</td>
</tr>
<tr>
<td>b If &quot;Yes&quot; to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If &quot;Yes,&quot; complete Schedule R, Part V, line 2</td>
<td>35b</td>
<td>X</td>
</tr>
<tr>
<td>36 <strong>Section 501(c)(3) organizations.</strong> Did the organization make any transfers to an exempt non-charitable related organization? If &quot;Yes,&quot; complete Schedule R, Part V, line 2</td>
<td>36</td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule R, Part VI</td>
<td>37</td>
<td>X</td>
</tr>
<tr>
<td>38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?</td>
<td>38</td>
<td>X</td>
</tr>
</tbody>
</table>

**Note:** All Form 990 filers are required to complete Schedule O

---

## Part V Statements Regarding Other IRS Filings and Tax Compliance

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

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable</td>
<td>1a</td>
<td></td>
</tr>
<tr>
<td>1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable</td>
<td>1b</td>
<td></td>
</tr>
<tr>
<td>1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?</td>
<td>1c</td>
<td>X</td>
</tr>
</tbody>
</table>
Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return ........................................... 2a | 141

b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b

Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 2b

3a Did the organization have unrelated business gross income of $1,000 or more during the year? 3a

b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b

4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 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

b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b

c 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? 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).

a Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor? 7a

b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b

c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c

d If "Yes," indicate the number of Forms 8282 filed during the year _________________. 7d

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e

f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f

g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g

h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h

8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8

9 Sponsoring organizations maintaining donor advised funds.

a Did the sponsoring organization make any taxable distributions under section 4966? 9a

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b

10 Section 501(c)(7) organizations. Enter:

a Initiation fees and capital contributions included on Part VIII, line 12 _________________. 10a

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities _________________. 10b

11 Section 501(c)(12) organizations. Enter:

a Gross income from members or shareholders _________________. 11a

b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) _________________. 11b

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year _________________. 12b

13 Section 501(c)(29) qualified nonprofit health insurance issuers.

a Is the organization licensed to issue qualified health plans in more than one state? 13a

Note: See the instructions for additional information the organization must report on Schedule O.

b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans _________________. 13b

c Enter the amount of reserves on hand _________________. 13c

14a Did the organization receive any payments for indoor tanning services during the tax year? 14a

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b

15 Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? 15

If "Yes," see instructions and file Form 4720, Schedule N.

16 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 A. Governing Body and Management

1a. Enter the number of voting members of the governing body at the end of the tax year:  
- Yes: [ ] No: [X]  
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.

1b. Enter the number of voting members included on line 1a, above, who are independent:  
- Yes: [X] No: [ ]

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?  
- Yes: [ ] No: [X]

3. Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?  
- Yes: [ ] No: [X]

4. Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  
- Yes: [ ] No: [X]

5. Did the organization become aware during the year of a significant diversion of the organization's assets?  
- Yes: [ ] No: [X]

6. Did the organization have members or stockholders?  
- Yes: [X] No: [ ]

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?  
- Yes: [X] No: [ ]

7b. Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  
- Yes: [ ] No: [X]

8. Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  
- a. The governing body?  
  - Yes: [ ] No: [X]

- b. Each committee with authority to act on behalf of the governing body?  
  - Yes: [ ] No: [X]

9. Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O:  
- Yes: [X] No: [ ]

## Section B. Policies

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

10a. Did the organization have local chapters, branches, or affiliates?  
- Yes: [X] No: [ ]

- 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?  
  - Yes: [ ] No: [X]

11a. Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  
- Yes: [X] No: [ ]

- b. Describe in Schedule O the process, if any, used by the organization to review this Form 990.  
- Yes: [ ] No: [X]

12a. Did the organization have a written conflict of interest policy? If "No," go to line 13  
- Yes: [ ] No: [X]

- b. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  
  - Yes: [ ] No: [X]

- c. Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  
  - Yes: [ ] No: [X]

13. Did the organization have a written whistleblower policy?  
- Yes: [ ] No: [X]

14. Did the organization have a written document retention and destruction policy?  
- Yes: [ ] No: [X]

15. Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  
- a. The organization's CEO, Executive Director, or top management official  
  - Yes: [ ] No: [X]

- b. Other officers or key employees of the organization  
  - Yes: [ ] No: [X]

- c. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  
  - Yes: [ ] No: [X]

16a. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  
- Yes: [ ] No: [X]

- b. If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  
  - Yes: [ ] No: [X]

## Section C. Disclosure

17. List the states with which a copy of this Form 990 is required to be filed:  
- AK, AZ, CO, DE, FL, GA, IA, ID, IN, KY, MD, MN

18. Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
- [X] Own website  
- [ ] Another's website  
- [X] Upon request  
- [ ] Other (explain on Schedule O)

19. Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.  
- Yes: [ ] No: [X]

20. State the name, address, and telephone number of the person who possesses the organization's books and records:  
- Robert P. Depue - 212-226-6214

355 Lexington Avenue, 19th Floor, New York, NY 10017

See Schedule O for full list of states
### 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 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 and/or Box 7 of Form 1099-MISC) 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.

### Table: Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Rev. David Jones President/CEO (part year)</td>
<td>35.00</td>
<td>X X</td>
<td>203,774.00</td>
<td>0.00</td>
<td>100,000.00</td>
</tr>
<tr>
<td>(2) Robert P. Depue CFO/Treasurer</td>
<td>35.00</td>
<td>X</td>
<td>203,774.00</td>
<td>0.00</td>
<td>100,000.00</td>
</tr>
<tr>
<td>(3) Craig Mayes Chief Spiritual Formation Officer (part year)</td>
<td>35.00</td>
<td>X</td>
<td>203,774.00</td>
<td>0.00</td>
<td>100,000.00</td>
</tr>
<tr>
<td>(4) James Winans CDO (part year), CEO</td>
<td>35.00</td>
<td>X X</td>
<td>203,774.00</td>
<td>0.00</td>
<td>100,000.00</td>
</tr>
<tr>
<td>(5) Sarino Tropeano Chief Operations Officer</td>
<td>35.00</td>
<td>X</td>
<td>203,774.00</td>
<td>0.00</td>
<td>100,000.00</td>
</tr>
<tr>
<td>(6) Cheryl Mitchell Chief Program Officer</td>
<td>35.00</td>
<td>X</td>
<td>203,774.00</td>
<td>0.00</td>
<td>100,000.00</td>
</tr>
<tr>
<td>(7) Laurie-Anne Bentley Chief Development Officer</td>
<td>35.00</td>
<td>X</td>
<td>203,774.00</td>
<td>0.00</td>
<td>100,000.00</td>
</tr>
<tr>
<td>(8) Dwight Jacobsen Chairman</td>
<td>1.00</td>
<td>X X</td>
<td>203,774.00</td>
<td>0.00</td>
<td>100,000.00</td>
</tr>
<tr>
<td>(9) Charles W. Veth Director</td>
<td>1.00</td>
<td>X</td>
<td>203,774.00</td>
<td>0.00</td>
<td>100,000.00</td>
</tr>
<tr>
<td>(10) Vaughn Weimer Director</td>
<td>1.00</td>
<td>X</td>
<td>203,774.00</td>
<td>0.00</td>
<td>100,000.00</td>
</tr>
<tr>
<td>(11) Summer Ellis Director</td>
<td>1.00</td>
<td>X</td>
<td>203,774.00</td>
<td>0.00</td>
<td>100,000.00</td>
</tr>
<tr>
<td>(12) Hank Higdon Director</td>
<td>1.00</td>
<td>X</td>
<td>203,774.00</td>
<td>0.00</td>
<td>100,000.00</td>
</tr>
<tr>
<td>(13) Pamela Leggett Director</td>
<td>1.00</td>
<td>X</td>
<td>203,774.00</td>
<td>0.00</td>
<td>100,000.00</td>
</tr>
<tr>
<td>(14) Ginni Elmore Director</td>
<td>1.00</td>
<td>X</td>
<td>203,774.00</td>
<td>0.00</td>
<td>100,000.00</td>
</tr>
<tr>
<td>(15) Jamie Knauss Director</td>
<td>1.00</td>
<td>X</td>
<td>203,774.00</td>
<td>0.00</td>
<td>100,000.00</td>
</tr>
<tr>
<td>(16) Allen Goetz Director</td>
<td>1.00</td>
<td>X</td>
<td>203,774.00</td>
<td>0.00</td>
<td>100,000.00</td>
</tr>
<tr>
<td>(17) Addison Hardy Director</td>
<td>1.00</td>
<td>X</td>
<td>203,774.00</td>
<td>0.00</td>
<td>100,000.00</td>
</tr>
</tbody>
</table>
### Part VII

**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(18) Scott Stephenson</td>
<td>Director 1.00</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(19) Bryan Cho</td>
<td>Director 1.00</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(20) Laura Woodward</td>
<td>Director 1.00</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(21) Alexandra Vassilaros</td>
<td>Director 1.00</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(22) Nicholas DeMarco</td>
<td>Director (part year) 0.00</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
</tbody>
</table>

| 1b Subtotal | | | 1,189,153. | 0. | 310,768. |
| c Total from continuation sheets to Part VII, Section A | | | 0. | 0. | 0. |
| d Total (add lines 1b and 1c) | | | 1,189,153. | 0. | 310,768. |

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization: 7

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual: Yes, No

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If "Yes," complete Schedule J for such individual: Yes, No

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person: Yes, No

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universal Mailing Service, Inc.</td>
<td>Printing &amp; Mailing</td>
<td>175,369.</td>
</tr>
<tr>
<td>10 New England Ave, Piscataway, NJ 08854</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Blackbaud</td>
<td></td>
<td></td>
</tr>
<tr>
<td>65 Fairchild St, Charleston, SC 29492</td>
<td>Software</td>
<td>169,368.</td>
</tr>
<tr>
<td>International Protection Group, LLC</td>
<td></td>
<td></td>
</tr>
<tr>
<td>481 8th Ave, Suite#1130, New York, NY 10001</td>
<td>Security</td>
<td>160,487.</td>
</tr>
<tr>
<td>Denali Solutions, LLC</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22 Dolly Lane, Lagrangeville, NY 12540</td>
<td>IT Support</td>
<td>151,773.</td>
</tr>
<tr>
<td>The Horah Group, 351 Manville Road, Ste 105, Pleasantville, NY 10570</td>
<td>Printing &amp; Mailing</td>
<td>140,131.</td>
</tr>
</tbody>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization: 7
## Part VIII  Statement of Revenue

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

- [ ]

### Contributions, Gifts, Grants and Other Similar Amounts

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 a</td>
<td>Federated campaigns</td>
<td>1a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 b</td>
<td>Membership dues</td>
<td>1b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 c</td>
<td>Fundraising events</td>
<td>1c</td>
<td>1,440,900.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 d</td>
<td>Related organizations</td>
<td>1d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 e</td>
<td>Government grants (contributions)</td>
<td>1e</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 f</td>
<td>All other contributions, gifts, grants, and similar amounts not included above</td>
<td>1f</td>
<td>28,200,491.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 g</td>
<td>Noncash contributions included in lines 1a-1f</td>
<td>1g</td>
<td>8,102,292.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Total, Add lines 1a-1f</td>
<td>h</td>
<td>29,641,391.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Program Service Revenue

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Business Code</th>
<th>(A) Total revenue</th>
<th>(B) Total revenue</th>
<th>(C) Total revenue</th>
<th>(D) Total revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 a</td>
<td>Retreat Center/Camp</td>
<td>900099</td>
<td>191,611.</td>
<td>191,611.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 b</td>
<td>Adult Programs</td>
<td>900099</td>
<td>54,341.</td>
<td>54,341.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 c</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 d</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 e</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 f</td>
<td>All other program service revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Total, Add lines 2a-2f</td>
<td></td>
<td>245,952.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Other Revenue

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>(A) Total revenue</th>
<th>(B) Total revenue</th>
<th>(C) Total revenue</th>
<th>(D) Total revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>Investment income (including dividends, interest, and other similar amounts)</td>
<td></td>
<td></td>
<td>208,009.</td>
<td>208,009.</td>
</tr>
<tr>
<td>4</td>
<td>Income from investment of tax-exempt bond proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Royalties</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Gross rents

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>(i) Real</th>
<th>(ii) Personal</th>
</tr>
</thead>
<tbody>
<tr>
<td>6 a</td>
<td>Gross rents</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 b</td>
<td>Less: rental expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 c</td>
<td>Rental income or (loss)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 d</td>
<td>Net rental income or (loss)</td>
<td>(i) Securities</td>
<td>(ii) Other</td>
</tr>
<tr>
<td>7 a</td>
<td>Gross amount from sales of assets other than inventory</td>
<td>(i) Securities</td>
<td>(ii) Other</td>
</tr>
<tr>
<td>7 b</td>
<td>Less: cost or other basis and sales expenses</td>
<td>(i) Securities</td>
<td>(ii) Other</td>
</tr>
<tr>
<td>7 c</td>
<td>Gain or (loss)</td>
<td>(i) Securities</td>
<td>(ii) Other</td>
</tr>
<tr>
<td>7 d</td>
<td>Net gain or (loss)</td>
<td>(i) Securities</td>
<td>(ii) Other</td>
</tr>
</tbody>
</table>

### Gross income from fundraising events (not including $1,440,900 of contributions reported on line 1c).

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>(A) Total revenue</th>
<th>(B) Total revenue</th>
<th>(C) Total revenue</th>
<th>(D) Total revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>8 a</td>
<td>Gross income from fundraising events</td>
<td>8a</td>
<td>166,115.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 b</td>
<td>Less: direct expenses</td>
<td>8b</td>
<td>180,055.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 c</td>
<td>Net income or (loss) from fundraising events</td>
<td>8c</td>
<td>-13,940.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Gross income from gaming activities.

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>(A) Total revenue</th>
<th>(B) Total revenue</th>
<th>(C) Total revenue</th>
<th>(D) Total revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 a</td>
<td>Gross income from gaming activities</td>
<td>9a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 b</td>
<td>Less: direct expenses</td>
<td>9b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 c</td>
<td>Net income or (loss) from gaming activities</td>
<td>9c</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Gross sales of inventory, less returns and allowances.

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>(A) Total revenue</th>
<th>(B) Total revenue</th>
<th>(C) Total revenue</th>
<th>(D) Total revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 a</td>
<td>Gross sales of inventory, less returns and allowances</td>
<td>10a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 b</td>
<td>Less: cost of goods sold</td>
<td>10b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 c</td>
<td>Net income or (loss) from sales of inventory</td>
<td>10c</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Miscellaneous Revenue

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Business Code</th>
<th>(A) Total revenue</th>
<th>(B) Total revenue</th>
<th>(C) Total revenue</th>
<th>(D) Total revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>11 a</td>
<td></td>
<td></td>
<td>135.</td>
<td>135.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 c</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 d</td>
<td>All other revenue</td>
<td>900099</td>
<td>135.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Total, Add lines 11a-11d</td>
<td></td>
<td>135.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Total revenue. See instructions</td>
<td></td>
<td>30,081,547.</td>
<td>246,087.</td>
<td>0.</td>
<td>194,069.</td>
</tr>
</tbody>
</table>
### Statement of Functional Expenses

**Part IX**

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.

<table>
<thead>
<tr>
<th></th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</td>
<td>5,150,417.</td>
<td>5,150,417.</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td>1,381,312.</td>
<td>932,408.</td>
<td>85,610.</td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td>6,781,146.</td>
<td>4,537,968.</td>
<td>410,250.</td>
</tr>
<tr>
<td>8</td>
<td>Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td>227,543.</td>
<td>138,506.</td>
<td>28,144.</td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td>958,341.</td>
<td>696,284.</td>
<td>56,658.</td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td>642,601.</td>
<td>438,876.</td>
<td>38,553.</td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (nonemployees):</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Management</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Legal</td>
<td>53,772.</td>
<td>39,811.</td>
<td>4,952.</td>
</tr>
<tr>
<td>c</td>
<td>Accounting</td>
<td>120,000.</td>
<td>120,000.</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Lobbying</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Professional fundraising services. See Part IV, line 17</td>
<td>729,323.</td>
<td></td>
<td>729,323.</td>
</tr>
<tr>
<td>f</td>
<td>Investment management fees</td>
<td>84,388.</td>
<td></td>
<td>84,388.</td>
</tr>
<tr>
<td>g</td>
<td>Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)</td>
<td>844,184.</td>
<td>365,217.</td>
<td>306,404.</td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td>296,471.</td>
<td>2,487.</td>
<td>1.</td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td>222,230.</td>
<td>129,682.</td>
<td>16,011.</td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td>1,392,415.</td>
<td>998,324.</td>
<td>72,829.</td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td>167,397.</td>
<td>139,185.</td>
<td>1,337.</td>
</tr>
<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td>1,649.</td>
<td>1,276.</td>
<td>132.</td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td>148,598.</td>
<td>31.</td>
<td>148,567.</td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td>812,813.</td>
<td>688,029.</td>
<td>2,533.</td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td>316,788.</td>
<td>231,460.</td>
<td>81,396.</td>
</tr>
<tr>
<td>24</td>
<td>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.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Food</td>
<td>3,432,948.</td>
<td>3,432,948.</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Program Supplies</td>
<td>1,718,232.</td>
<td>1,701,011.</td>
<td>2,710.</td>
</tr>
<tr>
<td>c</td>
<td>Equip Rental &amp; Maint.</td>
<td>374,541.</td>
<td>271,446.</td>
<td>15,109.</td>
</tr>
<tr>
<td>d</td>
<td>Staff Training</td>
<td>74,898.</td>
<td>62,091.</td>
<td>4,052.</td>
</tr>
<tr>
<td>e</td>
<td>All other expenses</td>
<td>536,748.</td>
<td>22,511.</td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Total functional expenses. Add lines 1 through 24e</td>
<td>26,845,061.</td>
<td>20,109,811.</td>
<td>1,523,399.</td>
</tr>
<tr>
<td>26</td>
<td>Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Check here if following SOP 98-2 (ASC 958-720)
### Balance Sheet

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cash - non-interest-bearing</td>
<td>784,859</td>
<td>2,691,743</td>
</tr>
<tr>
<td>2</td>
<td>Savings and temporary cash investments</td>
<td>1,081,979</td>
<td>1,084,066</td>
</tr>
<tr>
<td>3</td>
<td>Pledges and grants receivable, net</td>
<td>2,078,888</td>
<td>3,580,442</td>
</tr>
<tr>
<td>4</td>
<td>Accounts receivable, net</td>
<td>319,446</td>
<td>380,867</td>
</tr>
<tr>
<td>5</td>
<td>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</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Notes and loans receivable, net</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Inventories for sale or use</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Prepaid expenses and deferred charges</td>
<td>204,496</td>
<td>228,842</td>
</tr>
<tr>
<td>10a</td>
<td>Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>26,293,809</td>
<td></td>
</tr>
<tr>
<td>10b</td>
<td>Less: accumulated depreciation</td>
<td>10,200,703</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Investments - publicly traded securities</td>
<td>7,140,371</td>
<td>7,502,497</td>
</tr>
<tr>
<td>12</td>
<td>Investments - other securities. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Investments - program-related. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Intangible assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Other assets. See Part IV, line 11</td>
<td>5,218,218</td>
<td>4,730,097</td>
</tr>
<tr>
<td>16</td>
<td><strong>Total assets.</strong> Add lines 1 through 15 (must equal line 33)</td>
<td>33,230,702</td>
<td>36,291,660</td>
</tr>
<tr>
<td>17</td>
<td>Accounts payable and accrued expenses</td>
<td>1,335,493</td>
<td>1,285,949</td>
</tr>
<tr>
<td>18</td>
<td>Grants payable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Deferred revenue</td>
<td>173,074</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Tax-exempt bond liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td>3,761,173</td>
<td>1,835,869</td>
</tr>
<tr>
<td>24</td>
<td>Unsecured notes and loans payable to unrelated third parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D</td>
<td>2,583,236</td>
<td>2,334,814</td>
</tr>
<tr>
<td>26</td>
<td><strong>Total liabilities.</strong> Add lines 17 through 25</td>
<td>7,852,976</td>
<td>7,445,682</td>
</tr>
<tr>
<td>27</td>
<td>Organizations that follow FASB ASC 958, check here</td>
<td></td>
<td></td>
</tr>
<tr>
<td>28</td>
<td>Net assets without donor restrictions</td>
<td>14,971,317</td>
<td>16,522,258</td>
</tr>
<tr>
<td>29</td>
<td>Capital stock or trust principal, or current funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30</td>
<td>Paid-in or capital surplus, or land, building, or equipment fund</td>
<td></td>
<td></td>
</tr>
<tr>
<td>31</td>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>32</td>
<td>Total net assets or fund balances</td>
<td>25,377,726</td>
<td>28,845,978</td>
</tr>
<tr>
<td>33</td>
<td>Total liabilities and net assets/fund balances</td>
<td>33,230,702</td>
<td>36,291,660</td>
</tr>
</tbody>
</table>

**Form 990 (2019) Page 11**
**Part XI Reconciliation of Net Assets**

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain on Schedule O)</td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))</td>
</tr>
</tbody>
</table>

**Part XII Financial Statements and Reporting**

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

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Cash</td>
<td>X Accrual</td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization's financial statements compiled or reviewed by an independent accountant?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Were the organization's financial statements audited by an independent accountant?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>If &quot;Yes,&quot; 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</td>
<td></td>
</tr>
</tbody>
</table>
**Part I**  
**Reason for Public Charity Status**  
(All organizations must complete this part.) See instructions.

1. A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2. A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)
3. A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4. A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital’s name, city, and state;
5. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
6. A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7. An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
8. A community trust described in section 170(b)(1)(A)(vii). (Complete Part II.)
9. An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and 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.)
12. An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
   a. **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
   b. **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
   c. **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
   d. **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
   e. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
   f. Enter the number of supported organizations .................................................................
   g. Provide the following information about the supported organization(s).
### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1   Gifts, grants, contributions, and</td>
<td>13,154,818</td>
<td>14,480,604</td>
<td>13,590,695</td>
<td>16,515,520</td>
<td>29,641,391</td>
<td>87,383,028</td>
</tr>
<tr>
<td>membership fees received. (Do not</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>include any &quot;unusual grants.&quot;</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2   Tax revenues levied for the</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>organization's benefit and either paid</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3   The value of services or facilities</td>
<td>13,154,818</td>
<td>14,480,604</td>
<td>13,590,695</td>
<td>16,515,520</td>
<td>29,641,391</td>
<td>87,383,028</td>
</tr>
<tr>
<td>furnished by a governmental unit to</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4   Total. Add lines 1 through 3</td>
<td>13,154,818</td>
<td>14,480,604</td>
<td>13,590,695</td>
<td>16,515,520</td>
<td>29,641,391</td>
<td>87,383,028</td>
</tr>
<tr>
<td>5   The portion of total contributions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>by each person (other than a</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>governmental unit or publicly</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>supported organization) included</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>on line 1 that exceeds 2% of the</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>amount shown on line 11,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>column (f)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6   Public support. Subtract line 5 from</td>
<td>1,944,931</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>line 4.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7   Amounts from line 4</td>
<td>13,154,818</td>
<td>14,480,604</td>
<td>13,590,695</td>
<td>16,515,520</td>
<td>29,641,391</td>
<td>87,383,028</td>
</tr>
<tr>
<td>8   Gross income from interest,</td>
<td>330,363</td>
<td>451,949</td>
<td>390,251</td>
<td>337,486</td>
<td>208,009</td>
<td>1,718,058</td>
</tr>
<tr>
<td>dividends, payments received on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>securities loans, rents, royalties,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9   Net income from unrelated business</td>
<td>175,046</td>
<td>167,081</td>
<td>327,597</td>
<td>316,399</td>
<td>166,250</td>
<td>1,152,373</td>
</tr>
<tr>
<td>activities, whether or not the</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10  Other income. Do not include gain</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>or loss from the sale of capital</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>assets (Explain in Part VI.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11  Total support. Add lines 7 through 10</td>
<td>90,253,459</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12  Gross receipts from related activities,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>etc. (see instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>12</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### First five years.

If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

### Section C. Computation of Public Support Percentage

| Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) | 14 | 94.66 % |
| Public support percentage from 2018 Schedule A, Part II, line 14 | 15 | 92.68 % |

#### a33 1/3% support test - 2019.
If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.

#### b33 1/3% support test - 2018.
If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.

If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

#### 18 Private foundation.
If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.
## Part II Support Schedule for Organizations Described in Section 509(a)(2)

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

### Section A. Public Support

**Calendar year (or fiscal year beginning in):**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Gifts, grants, contributions, and membership fees received. (Do not include any “unusual grants.”)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td><strong>Total. Add lines 1 through 5</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a</td>
<td>Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b</td>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c</td>
<td>Add lines 7a and 7b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td><strong>Public support. (Subtract line 7c from line 6)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

**Calendar year (or fiscal year beginning in):**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a</td>
<td>Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b</td>
<td>Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td><strong>Total support. (Add lines 9, 10a, 11, and 12)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td><strong>First five years. If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

15 | Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f)) | 15 |
16 | Public support percentage from 2018 Schedule A, Part III, line 15 | 16 |

### Section D. Computation of Investment Income Percentage

17 | Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f)) | 17 |
18 | Investment income percentage from 2018 Schedule A, Part III, line 17 | 18 |

19a | **33 1/3% support tests - 2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.** | | |
19b | **33 1/3% support tests - 2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.** | | |

20 | **Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.** | | |
## Section A. All Supporting Organizations

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
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<tr>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part IV Supporting Organizations (continued)

<table>
<thead>
<tr>
<th>11</th>
<th>Has the organization accepted a gift or contribution from any of the following persons?</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?</td>
</tr>
<tr>
<td>b</td>
<td>A family member of a person described in (a) above?</td>
</tr>
<tr>
<td>c</td>
<td>A 35% controlled entity of a person described in (a) or (b) above? If &quot;Yes&quot; to a, b, or c, provide detail in Part VI.</td>
</tr>
</tbody>
</table>

**Section B. Type I Supporting Organizations**

| 1 | Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization’s 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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. |

| 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. |

**Section C. Type II Supporting Organizations**

| 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). |

**Section D. All Type III Supporting Organizations**

| 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? |

| 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 "Yes," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). |

| 3 | By reason of the relationship described in (2), 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," explain in Part VI the role the organization’s supported organizations played in this regard. |

**Section E. Type III Functionally Integrated Supporting Organizations**

<table>
<thead>
<tr>
<th>1</th>
<th>Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>The organization satisfied the Activities Test. Complete line 2 below.</td>
</tr>
<tr>
<td>b</td>
<td>The organization is the parent of each of its supported organizations. Complete line 3 below.</td>
</tr>
<tr>
<td>c</td>
<td>The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2</th>
<th>Activities Test. Answer (a) and (b) below.</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>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 &quot;Yes,&quot; 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.</td>
</tr>
<tr>
<td>b</td>
<td>Did the activities described in (a) 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 &quot;Yes,&quot; explain in Part VI the reasons for the organization’s position that its supported organization(s) would have engaged in these activities but for the organization’s involvement.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3</th>
<th>Parent of Supported Organizations. Answer (a) and (b) below.</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>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? Provide details in Part VI.</td>
</tr>
<tr>
<td>b</td>
<td>Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If &quot;Yes,&quot; describe in Part VI the role played by the organization in this regard.</td>
</tr>
</tbody>
</table>
### Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

#### Section A - Adjusted Net Income

<table>
<thead>
<tr>
<th>Description</th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Net short-term capital gain</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2. Recoveries of prior-year distributions</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3. Other gross income (see instructions)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4. Add lines 1 through 3.</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>5. Depreciation and depletion</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>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)</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>7. Other expenses (see instructions)</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>8. <strong>Adjusted Net Income</strong> (subtract lines 5, 6, and 7 from line 4)</td>
<td>8</td>
<td></td>
</tr>
</tbody>
</table>

#### Section B - Minimum Asset Amount

<table>
<thead>
<tr>
<th>Description</th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Average monthly value of securities</td>
<td>1a</td>
<td></td>
</tr>
<tr>
<td>b. Average monthly cash balances</td>
<td>1b</td>
<td></td>
</tr>
<tr>
<td>c. Fair market value of other non-exempt-use assets</td>
<td>1c</td>
<td></td>
</tr>
<tr>
<td>d. <strong>Total</strong> (add lines 1a, 1b, and 1c)</td>
<td>1d</td>
<td></td>
</tr>
<tr>
<td>e. Discount claimed for blockage or other factors (explain in detail in Part VI):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Acquisition indebtedness applicable to non-exempt-use assets</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3. Subtract line 2 from line 1d.</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4. Cash deemed held for exempt use. Enter 1-1/2% of line 3 (if for greater amount, see instructions).</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>5. Net value of non-exempt-use assets (subtract line 4 from line 3)</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>6. Multiply line 5 by .035.</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>7. Recoveries of prior-year distributions</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>8. <strong>Minimum Asset Amount</strong> (add line 7 to line 6)</td>
<td>8</td>
<td></td>
</tr>
</tbody>
</table>

#### Section C - Distributable Amount

<table>
<thead>
<tr>
<th>Description</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Adjusted net income for prior year (from Section A, line 8, Column A)</td>
<td>1</td>
</tr>
<tr>
<td>2. Enter 85% of line 1.</td>
<td>2</td>
</tr>
<tr>
<td>3. Minimum asset amount for prior year (from Section B, line 8, Column A)</td>
<td>3</td>
</tr>
<tr>
<td>4. Enter greater of line 2 or line 3.</td>
<td>4</td>
</tr>
<tr>
<td>5. Income tax imposed in prior year</td>
<td>5</td>
</tr>
<tr>
<td>6. <strong>Distributable Amount</strong>. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).</td>
<td>6</td>
</tr>
</tbody>
</table>

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).
### Part V: Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

#### Section D - Distributions

<table>
<thead>
<tr>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>4</td>
</tr>
<tr>
<td>5</td>
</tr>
<tr>
<td>6</td>
</tr>
<tr>
<td>7</td>
</tr>
<tr>
<td>8</td>
</tr>
<tr>
<td>9</td>
</tr>
<tr>
<td>10</td>
</tr>
</tbody>
</table>

#### Section E - Distribution Allocations (see instructions)

<table>
<thead>
<tr>
<th>(i) Excess Distributions</th>
<th>(ii) Underdistributions Pre-2019</th>
<th>(iii) Distributable Amount for 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Distributable amount for 2019 from Section C, line 6</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI). See instructions.</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Excess distributions carryover, if any, to 2019</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>From 2014</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>From 2015</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>From 2016</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>From 2017</td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>From 2018</td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Total of lines 3a through e</td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Applied to 2019 distributable amount</td>
<td></td>
</tr>
<tr>
<td>i</td>
<td>Carryover from 2014 not applied (see instructions)</td>
<td></td>
</tr>
<tr>
<td>j</td>
<td>Remainder. Subtract lines 3g, 3h, and 3i from 3f.</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Distributions for 2019 from Section D, line 7:</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Applied to 2019 distributable amount</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Remainder. Subtract lines 4a and 4b from 4.</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td><strong>Excess distributions carryover to 2020.</strong> Add lines 3j and 4c.</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Breakdown of line 7:</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Excess from 2015</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Excess from 2016</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Excess from 2017</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Excess from 2018</td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Excess from 2019</td>
<td></td>
</tr>
</tbody>
</table>
**Part VI Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.

(See instructions.)

Schedule A, Part II, Line 10, Explanation for Other Income:

<table>
<thead>
<tr>
<th>Year</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>$16,069.</td>
</tr>
<tr>
<td>2017</td>
<td>$140,259.</td>
</tr>
<tr>
<td>2018</td>
<td>$88,907.</td>
</tr>
<tr>
<td>2019</td>
<td>$135.</td>
</tr>
</tbody>
</table>

Special Events

<table>
<thead>
<tr>
<th>Year</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>$158,977.</td>
</tr>
<tr>
<td>2016</td>
<td>$126,774.</td>
</tr>
<tr>
<td>2017</td>
<td>$187,338.</td>
</tr>
<tr>
<td>2018</td>
<td>$227,492.</td>
</tr>
<tr>
<td>2019</td>
<td>$166,115.</td>
</tr>
</tbody>
</table>
Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

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

** PUBLIC DISCLOSURE COPY **

Name of the organization
Christian Herald Association, Inc.
Employer identification number
13-1617086

Organization type (check one):

<table>
<thead>
<tr>
<th>Filers of:</th>
<th>Section:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form 990 or 990-EZ</td>
<td>☑ 501(c)(3) (enter number) organization</td>
</tr>
<tr>
<td></td>
<td>☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation</td>
</tr>
<tr>
<td></td>
<td>☐ 527 political organization</td>
</tr>
<tr>
<td>Form 990-PF</td>
<td>☐ 501(c)(3) exempt private foundation</td>
</tr>
<tr>
<td></td>
<td>☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation</td>
</tr>
<tr>
<td></td>
<td>☐ 501(c)(3) taxable private foundation</td>
</tr>
</tbody>
</table>

Check if your organization is covered by the General Rule or a Special Rule.

** Note: ** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☑ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) $5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling $5,000 or more during the year. $

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2019)
## Part I  Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No.</th>
<th>(b) Name, address, and ZIP + 4</th>
<th>(c) Total contributions</th>
<th>(d) Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>$2,529,844.</td>
<td>Person 🚧 Payroll 🚧 Noncash 🚧 (Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>$1,090,000.</td>
<td>Person 🚧 Payroll 🚧 Noncash 🚧 (Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>$980,170.</td>
<td>Person 🚧 Payroll 🚧 Noncash 🚧 (Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>4</td>
<td></td>
<td>$932,149.</td>
<td>Person 🚧 Payroll 🚧 Noncash 🚧 (Complete Part II for noncash contributions.)</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)
### Noncash Property

(see instructions). Use duplicate copies of Part II if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Description of noncash property given</th>
<th>(c) FMV (or estimate) (See instructions.)</th>
<th>(d) Date received</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>Food</td>
<td>$980,170.</td>
<td>09/30/20</td>
</tr>
<tr>
<td>4</td>
<td>Food</td>
<td>$932,149.</td>
<td>09/30/20</td>
</tr>
</tbody>
</table>

**Schedule B (Form 990, 990-EZ, or 990-PF) (2019)**

**Christian Herald Association, Inc.**

**Employer identification number**

13-1617086
Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this info. once.) $

Use duplicate copies of Part III if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
<th>(e) Transfer of gift</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Transferee's name, address, and ZIP + 4</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
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<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Transferee's name, address, and ZIP + 4</td>
</tr>
<tr>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Transferee's name, address, and ZIP + 4</td>
</tr>
<tr>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Name of organization: Christian Herald Association, Inc.

Employer identification number: 13-1617086

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)
### Part I. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

<table>
<thead>
<tr>
<th></th>
<th>(a) Donor advised funds</th>
<th>(b) Funds and other accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total number at end of year</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Aggregate value of contributions to (during year)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate value of grants from (during year)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Aggregate value at end of year</td>
<td></td>
</tr>
</tbody>
</table>

5. Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? [ ] Yes [ ] No

6. Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? [ ] Yes [ ] No

### Part II. Conservation Easements

1. Purpose(s) of conservation easements held by the organization (check all that apply).
   - Preservation of land for public use (for example, recreation or education)
   - Protection of natural habitat
   - Preservation of open space
   - Preservation of a historically important land area
   - Preservation of a certified historic structure

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

   a. Total number of conservation easements
   b. Total acreage restricted by conservation easements
   c. Number of conservation easements on a historic structure included in (a)
   d. Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register

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

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

5. Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? [ ] Yes [ ] No

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

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

8. Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? [ ] Yes [ ] No

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

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

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

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

      (i) Revenue included on Form 990, Part VIII, line 1
      (ii) Assets included in Form 990, Part X

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

   a. Revenue included on Form 990, Part VIII, line 1
   b. Assets included in Form 990, Part X
**Part III  Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets**

3. Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
   - [ ] Public exhibition
   - [ ] Scholarly research
   - [ ] Preservation for future generations
   - [ ] Loan or exchange program
   - [ ] Other

4. Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?
   - [ ] Yes
   - [ ] No

**Part IV  Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
   - [ ] Yes
   - [ ] No

   b. If "Yes," explain the arrangement in Part XIII and complete the following table:

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1c</td>
</tr>
<tr>
<td>1d</td>
</tr>
<tr>
<td>1e</td>
</tr>
<tr>
<td>1f</td>
</tr>
</tbody>
</table>

2a. Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?
   - [ ] Yes
   - [ ] No

   b. If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.

**Part V  Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

1a. Beginning of year balance

<table>
<thead>
<tr>
<th>(a) Current year</th>
<th>(b) Prior year</th>
<th>(c) Two years back</th>
<th>(d) Three years back</th>
<th>(e) Four years back</th>
</tr>
</thead>
<tbody>
<tr>
<td>5,054,829</td>
<td>6,688,946</td>
<td>6,575,358</td>
<td>6,333,049</td>
<td>6,148,373</td>
</tr>
</tbody>
</table>

b. Contributions

c. Net investment earnings, gains, and losses

<table>
<thead>
<tr>
<th>(a) Current year</th>
<th>(b) Prior year</th>
<th>(c) Two years back</th>
<th>(d) Three years back</th>
<th>(e) Four years back</th>
</tr>
</thead>
<tbody>
<tr>
<td>140,792</td>
<td>-3,436</td>
<td>399,728</td>
<td>512,875</td>
<td>452,659</td>
</tr>
</tbody>
</table>

d. Grants or scholarships

e. Other expenditures for facilities and programs

<table>
<thead>
<tr>
<th>(a) Current year</th>
<th>(b) Prior year</th>
<th>(c) Two years back</th>
<th>(d) Three years back</th>
<th>(e) Four years back</th>
</tr>
</thead>
<tbody>
<tr>
<td>64,732</td>
<td>1,630,681</td>
<td>286,140</td>
<td>270,566</td>
<td>267,983</td>
</tr>
</tbody>
</table>

f. Administrative expenses

<table>
<thead>
<tr>
<th>(a) Current year</th>
<th>(b) Prior year</th>
<th>(c) Two years back</th>
<th>(d) Three years back</th>
<th>(e) Four years back</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

g. End of year balance

<table>
<thead>
<tr>
<th>(a) Current year</th>
<th>(b) Prior year</th>
<th>(c) Two years back</th>
<th>(d) Three years back</th>
<th>(e) Four years back</th>
</tr>
</thead>
<tbody>
<tr>
<td>5,130,889</td>
<td>5,054,829</td>
<td>6,688,946</td>
<td>6,333,049</td>
<td></td>
</tr>
</tbody>
</table>

2. Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
   - [ ] Board designated or quasi-endowment
   - [ ] Permanent endowment
   - [ ] Term endowment

   The percentages on lines 2a, 2b, and 2c should equal 100%.

3a. Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
   (i) Unrelated organizations
   (ii) Related organizations

   b. If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4. Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI  Land, Buildings, and Equipment.** Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td>1,245,758</td>
<td></td>
<td>1,245,758</td>
<td></td>
</tr>
<tr>
<td>b Buildings</td>
<td>21,220,033</td>
<td>7,349,957</td>
<td>13,870,076</td>
<td></td>
</tr>
<tr>
<td>c Leasehold improvements</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Equipment</td>
<td>2,671,954</td>
<td>2,276,158</td>
<td>395,796</td>
<td></td>
</tr>
<tr>
<td>e Other</td>
<td>1,156,064</td>
<td>574,588</td>
<td>561,476</td>
<td></td>
</tr>
</tbody>
</table>

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)
### Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Schedule D (Form 990) 2019

Column (b) must equal Form 990, Part X, col. (B) line 12.

<table>
<thead>
<tr>
<th>(1)</th>
<th>(b)</th>
<th>(c)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(2)</th>
<th>(b)</th>
<th>(c)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(3)</th>
<th>(b)</th>
<th>(c)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

<table>
<thead>
<tr>
<th>(a) Description of investment</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
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<td></td>
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<tr>
<td>(7)</td>
<td></td>
<td></td>
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<tr>
<td>(8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Schedule D (Form 990) 2019

Column (b) must equal Form 990, Part X, col. (B) line 13.

<table>
<thead>
<tr>
<th>(1)</th>
<th>(b)</th>
<th>(c)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(2)</th>
<th>(b)</th>
<th>(c)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(3)</th>
<th>(b)</th>
<th>(c)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Deposits and other assets</td>
<td>251,047.</td>
</tr>
<tr>
<td>(2) Beneficial Interest in Perp. Trust</td>
<td>1,666,738.</td>
</tr>
<tr>
<td>(3) Due from related organizations</td>
<td>2,812,312.</td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
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<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
</tbody>
</table>

#### Schedule D (Form 990) 2019

(Column (b) must equal Form 990, Part X, col. (B) line 15.)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td>4,730,097.</td>
</tr>
</tbody>
</table>

### Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

<table>
<thead>
<tr>
<th>(a) Description of liability</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Federal income taxes</td>
<td>494,814.</td>
</tr>
<tr>
<td>(2) Post-retirement benefits payable</td>
<td>1,840,000.</td>
</tr>
<tr>
<td>(3) Recoverable subsidies</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
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<td>(5)</td>
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<td>(8)</td>
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<td>(9)</td>
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</tbody>
</table>

#### Schedule D (Form 990) 2019

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td>2,334,814.</td>
</tr>
</tbody>
</table>

| 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization’s financial statements that reports the organization’s liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII. |   |

Schedule D (Form 990) 2019
### Part XI: Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amounts Included on Line 1 but Not on Form 990, Part VIII, Line 12:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>a. Net unrealized gains (losses) on investments</td>
<td>2a</td>
</tr>
<tr>
<td></td>
<td>b. Donated services and use of facilities</td>
<td>2b</td>
</tr>
<tr>
<td></td>
<td>c. Recoveries of prior year grants</td>
<td>2c</td>
</tr>
<tr>
<td></td>
<td>d. Other (Describe in Part XIII.)</td>
<td>2d</td>
</tr>
<tr>
<td></td>
<td>e. Add lines 2a through 2d</td>
<td>2e</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part VIII, line 12, but not on line 1:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>4a</td>
</tr>
<tr>
<td></td>
<td>b. Other (Describe in Part XIII.)</td>
<td>4b</td>
</tr>
<tr>
<td></td>
<td>c. Add lines 4a and 4b</td>
<td>4c</td>
</tr>
<tr>
<td>5</td>
<td>Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)</td>
<td></td>
</tr>
</tbody>
</table>

### Part XII: Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amounts Included on Line 1 but Not on Form 990, Part IX, Line 25:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total expenses and losses per audited financial statements</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>a. Donated services and use of facilities</td>
<td>2a</td>
</tr>
<tr>
<td></td>
<td>b. Prior year adjustments</td>
<td>2b</td>
</tr>
<tr>
<td></td>
<td>c. Other losses</td>
<td>2c</td>
</tr>
<tr>
<td></td>
<td>d. Other (Describe in Part XIII.)</td>
<td>2d</td>
</tr>
<tr>
<td></td>
<td>e. Add lines 2a through 2d</td>
<td>2e</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part IX, line 25, but not on line 1:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>4a</td>
</tr>
<tr>
<td></td>
<td>b. Other (Describe in Part XIII.)</td>
<td>4b</td>
</tr>
<tr>
<td></td>
<td>c. Add lines 4a and 4b</td>
<td>4c</td>
</tr>
<tr>
<td>5</td>
<td>Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)</td>
<td></td>
</tr>
</tbody>
</table>

### Part XIII: Supplemental Information

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

---

**Part V, line 4:**

Endowment funds are spent in accordance with each donor’s requirements.

Intended use is on a case by case basis, but may include Compassionate Care (basic & emergency needs support), Residential Programs for Men and Women, or Children’s Programs ((Mont Lawn Camp and Mont Lawn City Camp).

---

**Part V, lines 2a-2c:**

In accordance with the principles of FASB ASU 2016-14 (ASC 958), the organization has implemented required changes to its audited financial statements for the period ended 9/30/2020. To date, Schedule D has not been updated to reflect changes made by this standard. Thus, we have reported the revised net asset categories from the audited financial statements.
Christian Herald Association, Inc. 13-1617086

statements as follows on Form 990, Schedule D, Part V, Lines 2a-2c:

Line 2a - Without donor restrictions

Line 2b - With donor restrictions
**Part I  General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1. **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? □ Yes □ No

2. **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3. **Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

<table>
<thead>
<tr>
<th>(a) Region</th>
<th>(b) Number of offices in the region</th>
<th>(c) Number of employees, agents, and independent contractors in the region</th>
<th>(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)</th>
<th>(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region</th>
<th>(f) Total expenditures for and investments in the region</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central America and the Caribbean</td>
<td>0</td>
<td>0</td>
<td>Investments</td>
<td></td>
<td>346,224</td>
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</tbody>
</table>

3a Subtotal ................................| 0                                  | 0                                                                          |                                                                                  |                                                                                  | 346,224                                               |
3b Total from continuation sheets to Part I ........... | 0                                  | 0                                                                          |                                                                                  |                                                                                  | 0                                                     |
3c Totals (add lines 3a and 3b) ..................... | 0                                  | 0                                                                          |                                                                                  |                                                                                  | 346,224                                               |
Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name of organization</th>
<th>(b) IRS code section and EIN (if applicable)</th>
<th>(c) Region</th>
<th>(d) Purpose of grant</th>
<th>(e) Amount of cash grant</th>
<th>(f) Manner of cash disbursement</th>
<th>(g) Amount of noncash assistance</th>
<th>(h) Description of noncash assistance</th>
<th>(i) Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

2. Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.

3. Enter total number of other organizations or entities.
### Part III Grants and Other Assistance to Individuals Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Region</th>
<th>(c) Number of recipients</th>
<th>(d) Amount of cash grant</th>
<th>(e) Manner of cash disbursement</th>
<th>(f) Amount of noncash assistance</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Method of valuation (book, FMV, appraisal, other)</th>
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</tbody>
</table>

Christian Herald Association, Inc. 13-1617086
### Part IV Foreign Forms

1. **Was the organization a U.S. transferor of property to a foreign corporation during the tax year?**
   - If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)
   - □ Yes [ ] No

2. **Did the organization have an interest in a foreign trust during the tax year?**
   - If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don’t file with Form 990)
   - □ Yes [ ] No

3. **Did the organization have an ownership interest in a foreign corporation during the tax year?**
   - If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)
   - □ Yes [ ] No

4. **Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year?**
   - If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)
   - □ Yes [ ] No

5. **Did the organization have an ownership interest in a foreign partnership during the tax year?**
   - If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)
   - □ Yes [ ] No

6. **Did the organization have any operations in or related to any boycotting countries during the tax year?**
   - If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don’t file with Form 990)
   - □ Yes [ ] No
Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
**Part I 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.

1. Indicate whether the organization raised funds through any of the following activities. Check all that apply.
   - [X] Mail solicitations
   - [X] Internet and email solicitations
   - [X] Phone solicitations
   - [X] In-person solicitations
   - [X] Solicitation of non-government grants
   - [X] Solicitation of government grants
   - Special fundraising events

2. Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  
   - [X] Yes
   - No

   If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

<table>
<thead>
<tr>
<th>Name and address of individual or entity (fundraiser)</th>
<th>Activity</th>
<th>(iii) Did fundraiser have custody or control of contributions?</th>
<th>(iv) Gross receipts from activity</th>
<th>(v) Amount paid to (or retained by) fundraiser listed in col. (i)</th>
<th>(vi) Amount paid to (or retained by) organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Focus Group - 521 A1A Beach Blvd, St. Augustine, FL</td>
<td>General major gift &amp; campaign fundraising</td>
<td>Yes</td>
<td>0.</td>
<td>134,477.</td>
<td>-134,477.</td>
</tr>
<tr>
<td>Five Q - P.O Box 346, Atlantic, IA 50022</td>
<td>Digital fundraising &amp; web counsel</td>
<td>X</td>
<td>0.</td>
<td>49,477.</td>
<td>-49,477.</td>
</tr>
<tr>
<td>The Stelter Company - 10435 New York Avenue, Des Moines, IA</td>
<td>Fundraising</td>
<td>X</td>
<td>0.</td>
<td>6,875.</td>
<td>-6,875.</td>
</tr>
<tr>
<td>One &amp; All - 2 N. Lake, Pasadena, CA 91101</td>
<td>Direct mail and digital fundraising</td>
<td>X</td>
<td>0.</td>
<td>479,371.</td>
<td>-479,371.</td>
</tr>
<tr>
<td>Gateway Communications - 16805 NE Mason Court,</td>
<td>Telemarketing</td>
<td>X</td>
<td>0.</td>
<td>40,967.</td>
<td>-40,967.</td>
</tr>
<tr>
<td>Caswell Zachry Grizzard LLC - 6301 Gaston Ave, Ste 715,</td>
<td>Legacy survey</td>
<td>X</td>
<td>0.</td>
<td>18,156.</td>
<td>-18,156.</td>
</tr>
</tbody>
</table>

   **Total**  729,323.  -729,323.

3. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

   AK, AZ, CO, DE, FL, GA, IA, ID, IN, KY, MD, MN, MT, NC, ND, NE, NH, NM, NV, PA, SD, TN, TX, VA, VT

   WA, WI, WV, WY

---

LHA  For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.  
Schedule G (Form 990 or 990-EZ) 2019

See Part IV for continuations
## 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.

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Event #1</th>
<th>(b) Event #2</th>
<th>(c) Other events</th>
<th>(d) Total events (add col. (a) through col. (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross receipts</td>
<td>1,353,806</td>
<td>162,330</td>
<td>90,879</td>
<td>1,607,015</td>
</tr>
<tr>
<td>2 Less: Contributions</td>
<td>1,220,817</td>
<td>129,204</td>
<td>90,879</td>
<td>1,440,900</td>
</tr>
<tr>
<td>3 Gross income (line 1 minus line 2)</td>
<td>132,989</td>
<td>33,126</td>
<td>166,115</td>
<td></td>
</tr>
</tbody>
</table>

### Direct Expenses

<table>
<thead>
<tr>
<th>(a) Bingo</th>
<th>(b) Pull tabs/instant bingo/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming (add col. (a) through col. (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Cash prizes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Noncash prizes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Other direct expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Volunteer labor</td>
<td>Yes</td>
<td>%</td>
<td>Yes</td>
</tr>
<tr>
<td>7 Direct expense summary. Add lines 2 through 5 in column (d)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Net gaming income summary. Subtract line 7 from line 1, column (d)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part III Gaming

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

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Bingo</th>
<th>(b) Pull tabs/instant bingo/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming (add col. (a) through col. (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Cash prizes</td>
<td></td>
<td></td>
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<tr>
<td>3 Noncash prizes</td>
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<tr>
<td>4 Rent/facility costs</td>
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<tr>
<td>5 Other direct expenses</td>
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</tr>
<tr>
<td>6 Volunteer labor</td>
<td>Yes</td>
<td>%</td>
<td>Yes</td>
<td>%</td>
</tr>
<tr>
<td>7 Direct expense summary. Add lines 2 through 5 in column (d)</td>
<td></td>
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</tr>
<tr>
<td>8 Net gaming income summary. Subtract line 7 from line 1, column (d)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Enter the state(s) in which the organization conducts gaming activities:

- Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No
- If "No," explain:

### Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

- ☐ Yes ☐ No
- If "Yes," explain:
**Schedule G (Form 990 or 990-EZ) 2019**

**Christian Herald Association, Inc.**

**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 | 13a % |
| b | An outside facility | 13b % |

**14** Enter the name and address of the person who prepares the organization’s gaming/special events books and records:

| Name |  |
| Address |  |

**15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? [ ] Yes [ ] No

**b** If "Yes," enter the amount of gaming revenue received by the organization $ \_\_\_\_\_$ and the amount 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:

| a | Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? [ ] Yes [ ] No |
| b | Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the 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 Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

**Schedule G, Part I, Line 2b, List of Ten Highest Paid Fundraisers:**

(i) **Name of Fundraiser:** The Focus Group

(ii) **Address of Fundraiser:** 521 A1A Beach Blvd, St. Augustine, FL  32080

(ii) **Activity:** General major gift & campaign fundraising counsel

(i) **Name of Fundraiser:** The Stelter Company

(ii) **Address of Fundraiser:** 10435 New York Avenue, Des Moines, IA  50322
(i) Name of Fundraiser: Gateway Communications

(i) Address of Fundraiser: 16805 NE Mason Court, Portland, OR 97230

(i) Name of Fundraiser: Caswell Zachry Grizzard LLC

(i) Address of Fundraiser: 6301 Gaston Ave, Ste 715, Dallas, TX 75214

Schedule G, Part I, Line 2b, column (iv)

Professional fundraising services were consulting in nature. No gross receipts were directly generated from the services provided.
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **X Yes**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blessings of Hope</td>
<td>20-8597936</td>
<td>501(c)(3)</td>
<td>0</td>
<td>1,795,267, Est Value</td>
<td>Surplus food</td>
<td>Program support</td>
<td></td>
</tr>
<tr>
<td>PO Box 567, Ephrata, PA 18324</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>New York City Rescue Mission</td>
<td>13-5596794</td>
<td>501(c)(3)</td>
<td>1,566,874, 0</td>
<td>498,720, Est Value</td>
<td>Surplus</td>
<td>Program support</td>
<td></td>
</tr>
<tr>
<td>355 Lexington Ave, 19th Floor</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>New York, NY 10017</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jehovah Jirah Church</td>
<td>47-4562419</td>
<td>501(c)(3)</td>
<td>0</td>
<td>498,720, Est Value</td>
<td>Surplus</td>
<td>Program support</td>
<td></td>
</tr>
<tr>
<td>119 Sherman Ave, Bronx, NY 10456</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Goodwill Rescue Mission</td>
<td>22-1487207</td>
<td>501(c)(3)</td>
<td>495,615, 0</td>
<td>0</td>
<td>Surplus</td>
<td>Program support</td>
<td></td>
</tr>
<tr>
<td>355 Lexington Ave, 19th Floor</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>New York, NY 10017</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Iglesia Cristo</td>
<td>13-3023026</td>
<td>501(c)(3)</td>
<td>0</td>
<td>352,992, Est Value</td>
<td>Surplus</td>
<td>Program support</td>
<td></td>
</tr>
<tr>
<td>159 Sherman Ave, New York, NY 10034</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>New Testament Church of God</td>
<td>13-3762440</td>
<td>501(c)(3)</td>
<td>0</td>
<td>231,148, Est Value</td>
<td>Surplus food</td>
<td>Program support</td>
<td></td>
</tr>
<tr>
<td>3356 Seymour Ave, Bronx, NY 10469</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table</td>
<td>9.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Enter total number of other organizations listed in the line 1 table</td>
<td>0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

LHA: For Paperwork Reduction Act Notice, see the Instructions for Form 990.
<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section if applicable</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Iglesia El Gran Yo Soy 897 Melrose Ave Bronx, NY 10451</td>
<td>45-4514182</td>
<td>501(c)(3)</td>
<td>0.00</td>
<td>168,000</td>
<td>Est Value</td>
<td>clothes</td>
<td>Program support</td>
</tr>
<tr>
<td>Stand Ministries 2842 West 24th St Brooklyn, NY 11224</td>
<td>82-1596546</td>
<td>501(c)(3)</td>
<td>0.00</td>
<td>22,107</td>
<td>Est Value</td>
<td>Surplus food</td>
<td>Program support</td>
</tr>
<tr>
<td>Prophet House</td>
<td></td>
<td>501(c)(3)</td>
<td>0.00</td>
<td>19,694</td>
<td>Est Value</td>
<td>Surplus food</td>
<td>Program support</td>
</tr>
</tbody>
</table>
### Part III Grants and Other Assistance to Domestic Individuals

Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of non-cash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(f) Description of noncash assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part IV Supplemental Information

Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

**Part I, Line 2:**

Christian Herald Association Inc. partners with other organizations serving New Yorkers in need. Specifically, the organization provides non-cash assistance and surplus food to other 501(c)(3) agencies that serve people experiencing hunger and homelessness. Christian Herald Association’s CFO monitors redistribution of these funds and resources to ensure they are used in accordance with our shared goal of fighting hunger, homelessness, and poverty.
**Part I Questions Regarding Compensation**

1. 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
   - [ ] Travel for companions
   - [ ] Tax indemnification and gross-up payments
   - [ ] Discretionary spending account
   - [x] Housing allowance or residence for personal use
   - [ ] Payments for business use of personal residence
   - [ ] Health or social club dues or initiation fees
   - [ ] Personal services (such as maid, chauffeur, chef)

2. 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.

3. 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?

4. 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
   - [ ] Independent compensation consultant
   - [ ] Form 990 of other organizations
   - [x] Written employment contract
   - [ ] Compensation survey or study
   - [x] Approval by the board or compensation committee

5. 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:
   - [ ] Receive a severance payment or change-of-control payment?
   - [ ] Participate in, or receive payment from, a supplemental nonqualified retirement plan?
   - [ ] Participate in, or receive payment from, an equity-based compensation arrangement?

6. 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:
   - [ ] The organization?
   - [ ] Any related organization?

7. 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:
   - [ ] The organization?
   - [ ] Any related organization?

8. Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

9. If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

---

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

Schedule J (Form 990) 2019
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).

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.

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)-(D)</th>
<th>(F) Compensation in column (B) reported as deferred on prior Form 990</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Rev. David Jones President/CEO (part year)</td>
<td>(i) 265,695. 0. 2,547. 16,329. 99,677. 384,248. 0.</td>
<td>(ii) 0. 0. 0. 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Robert P. Depue CFO/Treasurer</td>
<td>(i) 200,923. 0. 2,851. 8,037. 15,261. 227,072. 0.</td>
<td>(ii) 0. 0. 0. 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Craig Mayes Chief Spiritual Formation Officer (part year)</td>
<td>(i) 99,910. 0. 555. 4,365. 111,515. 216,345. 0.</td>
<td>(ii) 0. 0. 0. 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) James Winans CDO (part year), CEO</td>
<td>(i) 187,096. 0. 177. 7,498. 1,827. 196,598. 0.</td>
<td>(ii) 0. 0. 0. 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5) Sarino Tropeano Chief Operations Officer</td>
<td>(i) 147,619. 0. 875. 6,028. 9,498. 164,020. 0.</td>
<td>(ii) 0. 0. 0. 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6) Cheryl Mitchell Chief Program Officer</td>
<td>(i) 145,580. 0. 562. 5,962. 10,483. 162,587. 0.</td>
<td>(ii) 0. 0. 0. 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Schedule J (Form 990) 2019 Christian Herald Association, Inc. 13-1617086
Part I, Line 1a:

As a condition of employment, and as a convenience to the Organization, the President/CEO and the Chief Spiritual Formation Officer are required to live in Manhattan and received housing for the calendar year valued at $68,750 and $80,191, respectively. This was treated as a nontaxable benefit.
### SCHEDULE M
(990)

#### Noncash Contributions

**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.**

#### Name of the organization
Christian Herald Association, Inc.

#### Employer identification number
13-1617086

<table>
<thead>
<tr>
<th>Part I</th>
<th>Types of Property</th>
<th>(a) Check if applicable</th>
<th>(b) Number of contributions or items contributed</th>
<th>(c) Noncash contributions amounts reported on Form 990, Part VIII, line 1g</th>
<th>(d) Method of determining noncash contribution amounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Art - Works of art</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Art - Historical treasures</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Art - Fractional interests</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Books and publications</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Clothing and household goods</td>
<td></td>
<td>X 1,801,662</td>
<td>Weight, estimated retail</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Cars and other vehicles</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Boats and planes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Intellectual property</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Securities - Publicly traded</td>
<td></td>
<td>X 33 348,457</td>
<td>Selling price</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Securities - Closely held stock</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Securities - Partnership, LLC, or trust interests</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Securities - Miscellaneous</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Qualified conservation contribution - Historic structures</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Qualified conservation contribution - Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Real estate - Residential</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Real estate - Commercial</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Real estate - Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Collectibles</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Food inventory</td>
<td></td>
<td>X 2,957 5,335,017</td>
<td>Value based on weight</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Drugs and medical supplies</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Taxidermy</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Historical artifacts</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>23</td>
<td>Scientific specimens</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>24</td>
<td>Archeological artifacts</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Other ► ( Supplies )</td>
<td></td>
<td>X 786 617,156</td>
<td>Estimated value</td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>Other ►</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27</td>
<td>Other ►</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28</td>
<td>Other ►</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29</td>
<td>Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement</td>
<td></td>
<td>29</td>
<td>0</td>
<td>Yes No</td>
</tr>
</tbody>
</table>

**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 three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

- Yes [ ]
- No [ X ]

**b** If "Yes," describe the arrangement in Part II.

**31** Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

- Yes [ ]
- No [ X ]

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

- Yes [ ]
- No [ X ]

**b** If "Yes," describe in Part II.

**33** If the organization didn’t report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

---

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

Schedule M (Form 990) 2019
Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Schedule M, Part I, Column (b):

The number of contributions represent the number of contributions received, not the number of items donated.
Form 990, Item C

Doing Business As - Additional Name

Mont Lawn Camp and Retreat Center

Form 990, Part III, Line 1, Description of Organization Mission:

Our vision is clear: We are called to minister in New York City to men, women, and children caught in cycles of poverty, hopelessness, and dependencies of many kinds, and to see their lives transformed to hope, joy, lasting productivity, and eternal life through the power of Jesus Christ.

Our Christian, faith-based response to New York City's most challenging social problems has been the foundation of our ministry for 135 years. We have never affiliated with a particular church or denomination, and our services are provided to all regardless of belief.

Form 990, Part III, Line 4a, Program Service Accomplishments:

the Lower East Side, East Harlem, Harlem, and the Upper East Side.

Among all clients served, 91 exited our programs with stable employment and 74 unique clients exited our programs with stable housing.

Form 990, Part VI, Section A, line 1:

The Executive Committee will be comprised of three or more directors,
including the chairman of the board and the chairman of each board standing committee. The president shall be a non-voting member of the Executive Committee. The board shall designate the chairman of this committee. The Executive Committee shall have and exercise the authority of the board of directors between meetings of the board of directors, as prescribed by the board, to supervise the affairs of the Corporation, regulate its internal economy, approve expenditures and commitments, and act for and carry out the established policies of the Corporation. The Executive Committee shall also establish the formal agenda for the meetings of the board of directors and serve as the strategic planning committee of the board of directors.

All actions by the Executive Committee shall be recorded in minutes and reported to the board of directors at the meeting of the board next succeeding such action.

Form 990, Part VI, Section B, line 11b:

Form 990 is prepared by an independent CPA firm and reviewed in detail by the organization’s top management. The reviewed Form 990 is then provided to the board of directors prior to filing with the IRS.

Form 990, Part V, Line 2a

Christian Herald Association (CHA) does not file any W-2’s but has entered into an agreement with a professional employment organization for all employees, CHA reimburses the professional employment organization for the employees’ compensation and the reimbursements are reported on 990 Part VII, Section A and 990 Part IX, Lines 5-10.

Form 990, Part VI, Section B, Line 12c:
On a yearly basis, the board of directors reviews the conflict of interest policy, and approves any necessary revisions. Directors, officers, and key employees are then required to review the updated conflict of interest policy and disclose any known conflicts of interest. The CFO/Treasurer reviews the signed statements and the Board Chairman reviews the CFO's signed statement. Restrictions imposed on persons involved in transactions with potential conflicts include prohibiting them from participating in the board or committee deliberations and/or approval of the transaction.

Form 990, Part VI, Section B, Line 15:

Line 15a - The compensation of the President/CEO is determined by the Executive Committee based on, among other things, industry comparables from multiple public sources and seniority. The Executive Committee makes a recommendation to the board of directors, which then approves the final compensation package in an Executive session of the board. Following the Executive session, the Chairman informs the CFO/Corporate Secretary of the decision. The approval process is documented.

Line 15b - The President/CEO performs a compensation analysis based on, among other things, industry comparables and seniority. This analysis is then presented to the Executive Committee of the Board of Directors for review and input. The final determination on compensation for other officers and key employees is made by the President/CEO. The approval process is documented and was last completed during the fiscal year.

Form 990, Part VI, Line 17, List of States receiving copy of Form 990:

AK,AZ,CO,DE,FL,GA,IA,ID,IN,KY,MD,MN,MT,NC,ND,NE,NH,NM,NV,PA,SD,TN,TX,VA,VT

WA,WI,WV,WY
The organization's governing documents, conflict of interest policy, and financial statements are available to the public upon request. The financial statements and 990 are also available on the organization's website.

Form 990, Part XI, line 9, Changes in Net Assets:

| Change in Liability for Post-Retirement Benefits | 118,010. |
| Change in Value of Beneficial Interest in Perpetual Trusts | 8,039. |
| Total to Form 990, Part XI, Line 9 | 126,049. |
### Part I: Identification of Disregarded Entities

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN (if applicable) of disregarded entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Total income</th>
<th>(e) End-of-year assets</th>
<th>(f) Direct controlling entity</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

### Part II: Identification of Related Tax-Exempt Organizations

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Exempt Code section</th>
<th>(e) Public charity status (if section 501(c)(3))</th>
<th>(f) Direct controlling entity</th>
<th>(g) Section 512(b)(13) controlled entity?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heartsease Home, Inc. - 13-1857760</td>
<td>Charity</td>
<td>New York</td>
<td>501(c)(3)</td>
<td>Line 7</td>
<td>Christian Herald Association</td>
<td>No</td>
</tr>
<tr>
<td>The Bowery Mission Foundation - 47-1741012</td>
<td>Charity</td>
<td>New York</td>
<td>501(c)(3)</td>
<td>Line 10</td>
<td>Christian Herald Association</td>
<td>Yes</td>
</tr>
<tr>
<td>Kids With a Promise - 13-4178936</td>
<td>Supporting Organization</td>
<td>New York</td>
<td>509(c)(3)</td>
<td>Line 12a, I</td>
<td>Christian Herald Association</td>
<td>No</td>
</tr>
<tr>
<td>New York, NY 10017</td>
<td>Charity</td>
<td>New York</td>
<td>501(c)(3)</td>
<td>Line 7</td>
<td>Christian Herald Association</td>
<td>No</td>
</tr>
</tbody>
</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Part II Continuation of Identification of Related Tax-Exempt Organizations

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Exempt Code section</th>
<th>(e) Public charity status (if section 501(c)(3))</th>
<th>(f) Direct controlling entity</th>
<th>(g) Section 512(b)(13) controlled organization?</th>
</tr>
</thead>
<tbody>
<tr>
<td>355 Lexington Avenue, 19th Floor</td>
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</tbody>
</table>
**Part III** Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
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<td>Yes</td>
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**Part IV** Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Type of entity (C corp, S corp, or trust)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Percentage ownership</th>
<th>(i) Section 512(b)(13) controlled entity?</th>
<th>Yes</th>
<th>No</th>
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</tbody>
</table>
Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
   a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
   b Gift, grant, or capital contribution to related organization(s)
   c Gift, grant, or capital contribution from related organization(s)
   d Loans or loan guarantees to or for related organization(s)
   e Loans or loan guarantees by related organization(s)
   f Dividends from related organization(s)
   g Sale of assets to related organization(s)
   h Purchase of assets from related organization(s)
   i Exchange of assets with related organization(s)
   j Lease of facilities, equipment, or other assets to related organization(s)
   k Lease of facilities, equipment, or other assets from related organization(s)
   l Performance of services or membership or fundraising solicitations for related organization(s)
   m Performance of services or membership or fundraising solicitations by related organization(s)
   n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
   o Sharing of paid employees with related organization(s)
   p Reimbursement paid to related organization(s) for expenses
   q Reimbursement paid by related organization(s) for expenses
   r Other transfer of cash or property to related organization(s)
   s Other transfer of cash or property from related organization(s)

   If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

<table>
<thead>
<tr>
<th>Name of related organization</th>
<th>Transaction type (a-s)</th>
<th>Amount involved</th>
<th>Method of determining amount involved</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Goodwill Rescue Mission</td>
<td>B</td>
<td>495,615</td>
<td>Book value</td>
</tr>
<tr>
<td>(2) Goodwill Rescue Mission</td>
<td>L</td>
<td>104,259</td>
<td>Book value</td>
</tr>
<tr>
<td>(3) Goodwill Rescue Mission</td>
<td>N</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>(4) Goodwill Rescue Mission</td>
<td>O</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>(5) Goodwill Rescue Mission</td>
<td>Q</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>(6) Goodwill Rescue Mission</td>
<td>S</td>
<td>554,000</td>
<td></td>
</tr>
</tbody>
</table>
## Part V Continuation of Transactions With Related Organizations

<table>
<thead>
<tr>
<th>(a) Name of other organization</th>
<th>(b) Transaction type (a-s)</th>
<th>(c) Amount involved</th>
<th>(d) Method of determining amount involved</th>
</tr>
</thead>
<tbody>
<tr>
<td>New York City Rescue Mission</td>
<td>B</td>
<td>1,566,874</td>
<td>Book value</td>
</tr>
<tr>
<td>New York City Rescue Mission</td>
<td>K</td>
<td>287,658</td>
<td>Book value</td>
</tr>
<tr>
<td>New York City Rescue Mission</td>
<td>L</td>
<td>211,741</td>
<td>Book value</td>
</tr>
<tr>
<td>New York City Rescue Mission</td>
<td>N</td>
<td>0</td>
<td></td>
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<tr>
<td>New York City Rescue Mission</td>
<td>O</td>
<td>86,250</td>
<td></td>
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<tr>
<td>New York City Rescue Mission</td>
<td>P</td>
<td>239,568</td>
<td>Book value</td>
</tr>
<tr>
<td>New York City Rescue Mission</td>
<td>Q</td>
<td>142,798</td>
<td>Book value</td>
</tr>
<tr>
<td>New York City Rescue Mission</td>
<td>R</td>
<td>1,829,273</td>
<td>Book value</td>
</tr>
<tr>
<td>The Bowery Mission Foundation</td>
<td>S</td>
<td>0</td>
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</tr>
<tr>
<td>Heartsease Home</td>
<td>K</td>
<td>0</td>
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</tbody>
</table>

(17)

(18)

(19)

(20)

(21)

(22)

(23)

(24)
### Part VI Unrelated Organizations Taxable as a Partnership

Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(e) Are all partners sec. 501(c)(3) orgs.?</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
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<td>Yes</td>
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<td>No</td>
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</tbody>
</table>
Form 8868  
(Rev. January 2020)

Application for Automatic Extension of Time To File an Exempt Organization Return

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

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

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

<table>
<thead>
<tr>
<th>Type or print</th>
<th>Name of exempt organization or other filer, see instructions.</th>
<th>Taxpayer identification number (TIN)</th>
</tr>
</thead>
<tbody>
<tr>
<td>File by the due date for filing your return. See instructions.</td>
<td>Christian Herald Association, Inc.</td>
<td>13-1617086</td>
</tr>
<tr>
<td>File your return. See instructions.</td>
<td>Number, street, and room or suite no. If a P.O. box, see instructions.</td>
<td>355 Lexington Avenue, 19th Floor</td>
</tr>
<tr>
<td></td>
<td>City, town or post office, state, and ZIP code. For a foreign address, see instructions.</td>
<td>New York, NY 10017</td>
</tr>
</tbody>
</table>

Enter the Return Code for the return that this application is for (file a separate application for each return)...

<table>
<thead>
<tr>
<th>Application Is For</th>
<th>Return Code</th>
<th>Application Is For</th>
<th>Return Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form 990 or Form 990-EZ</td>
<td>01</td>
<td>Form 990-T (corporation)</td>
<td>07</td>
</tr>
<tr>
<td>Form 990-BL</td>
<td>02</td>
<td>Form 1041-A</td>
<td>08</td>
</tr>
<tr>
<td>Form 4720 (individual)</td>
<td>03</td>
<td>Form 4720 (other than individual)</td>
<td>09</td>
</tr>
<tr>
<td>Form 990-PF</td>
<td>04</td>
<td>Form 5227</td>
<td>10</td>
</tr>
<tr>
<td>Form 990-T (sec. 401(a) or 408(a) trust)</td>
<td>05</td>
<td>Form 6069</td>
<td>11</td>
</tr>
<tr>
<td>Form 990-T (trust other than above)</td>
<td>06</td>
<td>Form 8870</td>
<td>12</td>
</tr>
</tbody>
</table>

Robert F. Depue

Telephone No. 212-226-6214  
Fax No.  

If the organization does not have an office or place of business in the United States, check this box

If this is for a Group Return, enter the organization’s four digit Group Exemption Number (GEN) . If this is for the whole group, check this box and attach a list with the names and TINs of all members the extension is for.

1  I request an automatic 6-month extension of time until , to file the exempt organization return for the organization named above. The extension is for the organization’s return for:

   □ calendar year or
   □ tax year beginning and ending .

2  If the tax year entered in line 1 is for less than 12 months, check reason:

   □ Initial return  □ Final return

   □ Change in accounting period

3a  If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.

   □  $ .

3b  If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

   □  $ .

3c  Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

   □  $ .

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

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

Form 8868 (Rev. 1-2020)