Form 990
(Rev January 2020)
Department of the Treasury Internal Revenue Service

O Colonde

Return of Organization Exempt From Income Tax

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

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

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

2019
Open to Public Inspection

9

OMB No 1545-0047

Α	For th	e 2019 calendar year, or tax year beginning , and ending			
В	Check if			D Employe	r identification number
m					
믬	Address	Doing business as		47-0	443259
\sqcup	Name ch	ange Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephon	
	Initial retu				732-1831
H	Final retu				
Ш	terminated			- C	pelots \$ 475,487
	Amended			G Gross rec	ZEIDIS 3 1/3/10/
\equiv			H(a) Is this a gro	up return for s	subordinates? Yes X No
ш	Applicatio	n pending DIETER HEINZE			5.5.
		. 9080 LUEA LANE	H(b) Are all subo		
		SWARTZ CREEK MI 48473) If "No,"	attach a list	(see instructions)
$\overline{}$	Tax-exer	npt status X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527	7		
<u> </u>	Website		H(c) Group exer	nation numbe	or >
				ipion name	M State of legal domicile MI
K			fear of formation		M State of legal dorliche
	Part I	Summary			
	1 1	Bnefly describe the organization's mission or most significant activities			
ģ	1	RELIGIOUS PUBLICATIONS		M	ARI ED
Ĕ			1.		21460
Ë			·	1	1-2-20
Governance	2	Check this box I if the organization discontinued its operations or disposed of more than 25%	of its net assets		
	-	Number of voting members of the governing body (Part VI, line 1a)	0. 10 1101 000010	3	5
∞ 5	1				0
ë.	i	Number of independent voting members of the governing body (Part VI, line 1b)		4	
₹	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)		5	4
Activities	6	Total number of volunteers (estimate if necessary)		6	0
_	7a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	9,684
	Ь	Net unrelated business taxable income from Form 990-T, line 39		7b	8,684
			Pnor Year		Current Year
_	8	Contributions and grants (Part VIII, line 1h)	111	479	433,834
Ę	ر و ا	Program service revenue (Part VIII, line 2g)			0
Revenue	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	22	2,027	23,325
æ	10			,344	16,720
	1	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)	153	850	473,879
	13 (Grants and similar amounts paid (Part IX, column (A), lines 1–3)			0
	14	Benefits paid to or for members (Part IX, column (A), line 4)			.0
(n	15 3	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	67	7,273	69,564
Ş	16a	Professional fundraising fees (Part IX, column (A), line 11e)			0
122 Expenses	h -	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0			
⇜	1 47	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	157	,981	151,187
8	1			, 254	220,751
20		Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)			
ಹ	19 8	Revenue less expenses Subtract line 18 from line 12 INTEGRAL Heyenue Service		,404	253,128
DNAMES OF	§	Received US Bank - USB	Beginning of Curr		End of Year
	20	Total assets (Part X, line 16)	1,632		1,886,564
₹.	21	Total liabilities (Part X, line 26)		,921	4,149
ترجع	22 1	Net assets or fund balances Subtract line 21 from line 20 SEP 23 2020	1,629	,287	1,882,415
证	art II	Signature Block			
Z	nder per	natives of penjury, I declare that I have examined this return, including accompanying schedules and statement	s, and to the best	of my know	Medge and belief, it is
	ие, согте	ct, and complete Declaration of preparer (other than officer) is based on all information of preparer ha	as any knowledge	•	
Ş		· · · · · · · · · · · · · · · · · · ·	4	1/ 7	1-1-20
\mathcal{L}		Signature of officer	45.36	Date	
G				Date	
He	re	DIETER HEINZE TREASU	JRER		
		Type or print name and title			
		Print/Type preparer's name Proparir's signature	Date	Check	if PTIN
Paid	d	CARROLL G. BAKER, SR. ANGEL SBAKER, SK.	° 16/16/20	self-emp	woyed P00028751
Pre	parer	EDOMINI DANIME C DAVED D C		m's EIN	38-2173099
	Only	5080 W BRISTOL RD # 2A	FIII		
	,	THE TARREST ASSOCIATION OF THE PROPERTY OF THE			810-733-3450
_		Firm's address FLINT, MI 48507-2923	Pho	one no	
		S discuss this return with the preparer shown above? (see instructions)			X Yes No
For DAA	Paperw	ork Reduction Act Notice, see the separate instructions.			Form 990 (2019)
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Form 990 (2019) C	<u>CHRISTIAN UNITY P</u>	RESS	**-***3259	Page 2
Part III Sta	atement of Program Servi	ce Accomplishments	Ahio Dari III	X
		a response or note to any line in	this Part III	<u>_</u>
	e the organization's mission S PUBLICATIONS			
	•			
				·
		ogram services during the year which wer	e not listed on the	Yes X No
prior Form 990	o or 990-E27 ribe these new services on Schedi	ıle O		
· · · · · · · · · · · · · · · · · · ·		significant changes in how it conducts, an	y program	
services?	•	•		Yes X No
	ribe these changes on Schedule C			
		complishments for each of its three largest		
		nizations are required to report the amount	t of grants and allocations to others,	
tne total exper	nses, and revenue, if any, for each	program service reported		
4a (Code) (Expenses \$	including grants of \$) (Revenue \$)
	S PUBLICATIONS		, ,	·
4b (Code) (Expenses \$	including grants of \$) (Revenue \$)
N/A				
·				
4c (Code N/A) (Expenses \$	including grants of \$) (Revenue \$,
N/A				
			•	
Ad Other program	n services (Describe on Schedule	3)		
(Expenses \$) (Revenue \$)
	service expenses	220,751		

-*3259

_	Part IV Checklist of Required Schedules			
			Yes	N
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		l	}
	complete Schedule A	1	X	!
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		3
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3	├ ─	3
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			١,
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	-	3
5	is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	_ ا		 2
_	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		┌
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors		l	l
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	ء ا		2
-	"Yes," complete Schedule D, Part I	6	1	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		X
۰	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	<u> </u>		-
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D. Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			_
3	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			ĺ
	debt negotiation services? If "Yes," complete Schedule D, Part IV	وا		2
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	1		
•	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	[1	
	complete Schedule D, Part VI	11a	x	
b				_
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u> </u>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	- l		
	fundraising, business, investment, and program service activities outside the United States, or aggregate		·	v
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	1 4- 1		v
40	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	— - -	Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	46		v
17	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	17	ļ	X
10	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	''	 	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	-"	- 	
13	If "Yes," complete Schedule G, Part III	19	1	х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
_				

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

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Pa	art∛V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22	ļ	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			۱
	employees? If "Yes," complete Schedule J	23	├	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		ł	1
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			١.,
	through 24d and complete Schedule K. If "No," go to line 25a	24a	<u> </u>	X
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	├	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	İ		
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	 -	├ ─
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			٠,
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	 	X
þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	j		
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	i		.
	If "Yes," complete Schedule L, Part I	25b	├	X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%		1	
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	 	X
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		1	
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these		l	x
	persons? If "Yes," complete Schedule L, Part III	27		┞≏
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part			I
	IV instructions, for applicable filing thresholds, conditions, and exceptions)	ŀ	1	Ť
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	20-		x
_	"Yes," complete Schedule L, Part IV	28a 28b		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	200		 ^
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	28c		x
20	"Yes," complete Schedule L, Part IV	29		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	25	\vdash	-
30	conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	-31		
32	complete Schedule N, Part II	32	ŀ	x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
55	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	1	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
b	If "Yes" 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 "Yes," complete Schedule R, Part V, line 2	35Ь		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O	38		X
Pa	art 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			oxed
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	X	L

Pa	Statements Regarding Other IRS Filings and Tax Compliance (Commune)	<u> </u>	Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		Tes	No
Lu	Statements, filed for the calendar year ending with or within the year covered by this return 2a 4			į
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x	ĺ
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	x	ĺ
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	X	
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		X
ь	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)			É
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
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	1	Х
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).			
а	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	Ī	1
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		ı
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	Ī	ı
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	Ī	
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	1	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	Ì	
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12		1	:
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		1	
11	Section 501(c)(12) organizations. Enter		I	
а	Gross income from members or shareholders		I	:
b	Gross income from other sources (Do not net amounts due or paid to other sources		I	
-	against amounts due or received from them)		I	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	Ī	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		1	
	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		I	
	the organization is licensed to issue qualified health plans		ı	
С	Enter the amount of reserves on hand		🖠	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	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	1	X
	If "Yes," see instructions and file Form 4720, Schedule N		1	
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	Ţ	X
-	If "Yes," complete Form 4720, Schedule O			
			000	

Form	990 (2019) CHRISTIAN UNITY PRESS	47-04432	59				P	age 6
	nt∛! Governance, Management, and Disclosure For each "Yes"	response to lines .	2 through	7b be	low, and fe	or a "N	o"	
W. A.	response to line 8a, 8b, or 10b below, describe the circumstances,							
	Check if Schedule O contains a response or note to any line in this							X
Sec	tion A. Governing Body and Management							
							Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		1	1a _	5		3/7	
	If there are material differences in voting rights among members of the governing body	, or	· [7:3		
	if the governing body delegated broad authority to an executive committee or similar	•						
	committee, explain on Schedule O.		1					
h	Enter the number of voting members included on line 1a, above, who are independent			1ь	0			
2	Did any officer, director, trustee, or key employee have a family relationship or a busine	ess relationship with				1		
-	any other officer, director, trustee, or key employee?	To to the total of				2	anna.	X
3	Did the organization delegate control over management duties customarily performed by	y or under the direct						
J	supervision of officers, directors, trustees, or key employees to a management compar					3		x
A	Did the organization make any significant changes to its governing documents since the		flod?	•	• • • •	4		x
4			illeu r	•		5		x
5	Did the organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization of the organi	11112811011 S ASSEIST	• • •	•		6		X
6	Did the organization have members or stockholders?					-		
7a	Did the organization have members, stockholders, or other persons who had the power	to elect or appoint					X	i
	one or more members of the governing body?				••	7a		
b	Are any governance decisions of the organization reserved to (or subject to approval by	y) members,				1	7.	
	stockholders, or persons other than the governing body?					7b	X	22283
8	Did the organization contemporaneously document the meetings held or written actions	undertaken during ti	he year by	the foli	lowing:	74.3	## <u>`</u>	
а	The governing body?					8a	<u> </u>	
b _/	Each committee with authority to act on behalf of the governing body?					8b	_X_	
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who		t					
	the organization's mailing address? If "Yes," provide the names and addresses on School					9	X	L
Sec	tion B. Policies (This Section B requests information about policies re	ot required by th	<u>ie Interna</u>	il Re	venue Co	<u>de.)</u>		
							Yes	
10a	Did the organization have local chapters, branches, or affiliates?					10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities	es of such chapters,						
	affiliates, and branches to ensure their operations are consistent with the organization's	exempt purposes?				10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its g	overning body before	filing the fo	orm?		11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form	n 9 90.						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13					12a		<u> </u>
b	Were officers, directors, or trustees, and key employees required to disclose annually in	nterests that could give	ve rise to co	onflicts	?	12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the	policy? If "Yes,"				1 1		
	describe in Schedule O how this was done					12c		
13	Did the organization have a written whistleblower policy?					13		X
14	Did the organization have a written document retention and destruction policy?			• •		14		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 d	eliberation and decis	ion?					
а	The organization's CEO, Executive Director, or top management official					15a	I	X
b	Other officers or key employees of the organization	• • •			•	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		•• ••	•				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or sin	nilar arrangement						
	with a tayable entity during the year?					16a	******	X
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization	on to evaluate its	•••		• • • • • •			
	participation in joint venture arrangements under applicable federal tax law, and take ste							
	organization's exempt status with respect to such arrangements?	-p- 10 041.0g44,4 11,0				16b	******	M000000
Sec	tion C. Disclosure			····		1 100 1		
17	List the states with which a copy of this Form 990 is required to be filed NONE							
	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applied to the states with which a copy or this routine states and required to be med by the copy of this routine states with which a copy or this routine states and required to be med by the copy of this routine states with which a copy or this routine states are required to be med by the copy of this routine states with which a copy or this routine states are required to be med by the copy of this routine states and required to be med by the copy of this routine states are required to be med by the copy of this routine states are required to be med by the copy of this routine states are required to be med by the copy of this routine states are required to be med by the copy of this routine states are required to be med by the copy of this routine states are required to be med by the copy of this routine states are required to be med by the copy of this routine states are required to be med by the copy of this routine states are required to be med by the copy of this routine states are required to be med by the copy of this routine states are required to be med by the copy of this routine states are required to be med by the copy of this routine states are required to be med by the copy of the copy		T /Section	 501/o	· · · · · · ·			
18	(3)s only) available for public inspection indicate how you made these available. Check	•	- , (Section	JU 1 (C)	'			
40		on Schedule O)	[Om e e e				
19	Describe on Schedule O whether (and if so, how) the organization made its governing d	ocuments, conflict of	interest po	ucy, a	na			
	financial statements available to the public during the tax year.							
20	State the name, address, and telephone number of the person who possesses the orga		records >					
	ETER HEINZE 5195 EXCHANGE D		40505					00-
_FI	INT	<u> </u>	48507		810	<u>-732</u>	<u> 2 - 18</u>	831

D	7
rane.	•

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

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See 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

(A) Name and title	(B) Average hours per week (list any	of	x, uni	Pos check ess pe ind a d	rson i	than o s both r/trust	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(VV-2/1099-MISC)	(W-2/1055-MISC)	related organizations
(1) DIETER HEINZE						<u> </u>				
	40.00						ł			
TREASURER	0.00		<u> </u>	X		<u> </u>		56,606	0	(
(2) DAVID GOERTZEN]	1								
	0.00	ľ								
DIRECTOR	0.00	X					L.	0	0	
(3) KURT PUDEL						ľ				
	0.00							_	_	_
VICE PRESIDENT	0.00			X				0	0	(
(4) HARRY SEMENJUK	1									
	0.00					1		_		_
PRESIDENT	0.00	-		X	<u> </u>	<u> </u>	L	0	0	
(5) GEORGE SIPPERT					ĺ	1				
	0.00							ا		,
SECRETARY	0.00		-	X	-	ļ		0	0	
(6)	}		,	!						
(7)									_	
(8)										
(9)					-					
(10)										
(11)										

	• (A) Name and trite	(B) Average hours per week (list any hours for related	of	x, unt	Pos check ess pe	rson i Irecto	than o s both r/truste emplo	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations			
		organizations below dotted line)	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee)r						
						, 								
	Subtotal								56,606					
c	Total from continuation shee Total (add lines 1b and 1c)	ts to Part VII, Se	ectio	n A				>	56,606			•		
2	Total number of individuals (increportable compensation from t			to the	ose I	sted	abo	ve) v		00,000 of				
3	Did the organization list any for employee on line 1a? <i>If "Yes," o</i> For any individual listed on line	complete Schedu 1a, is the sum of	le J f	or su	<i>ich ii</i> le co	ndıvı mpe	<i>dual</i> nsati	on a	nd other compensation fron	n the		3	Yes	No X
5	organization and related organization and related organization individual. Did any person listed on line 1a for services rendered to the organization.	receive or accru	e co	mper	nsatı	on fr	om a	ny u	nrelated organization or ind	ıvıdual		4		x x
Secti 1	on B. Independent Contractor Complete this table for your five	s								\$100,000 of				
	compensation from the organization	ation Report com (A) business address	pen	satio	n for	the	caler	dar	year ending with or within th	ne organization's tax year (B) on of services		Cor	(C) npensat	on
							\dashv							
	Total number of independent co received more than \$100,000 of							se li	sted above) who	0			990	mmm

•	nt p	Check	Sch	i Revenue edule O con	tains a	a respon	se or note	to any line in thi	s Part VIII		
								(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts st	1a	Federated camp	aigns		1a						
iran	b	Membership due			1b]			
Contributions, Gifts, Grants and Other Similar Amounts	C	Fundraising ever	nts		1c						
	d	Related organiza	ations		1d						
S, E	e	Government grants (u.	ıntı ibuto	115)	1e			1 4000000014000 t	• 1	,,,,,	* 1 (100) 1 100
Ö	1	All other contributions,	gifts, gra	ints,							
₹ <u>ĕ</u>		and similar amounts no	ot include	ed above	1f		433,834				
d it	g	Noncash contributions	ıncluded	ın lines 1a-1f	19	\$]			
<u>್ಟ್ ಕ</u>	h	Total. Add Imes	1a-1f				<u> </u>	433,834	, ····		
							Business Code				
ě	2a										
Program Service Revenue	b										
n Se	C										
Rev	d										
Ę.	e										
	f	All other progran					<u> </u>		,		<u> </u>
	9									I	<u></u>
	3	Investment incor		cluding dividend	s, intere	est, and	_				
		other similar am	•				•	23,325	23,325		
	4	Income from inve	estmei	nt of tax-exempt	bond p	roceeds	▶				
	5	Royalties		ı		r	<u> </u>		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		_		(ı) Real		(II) P	ersonal				
	6a	Gross rents	6a		,292						
	b	Less rental expenses	6b		,608						
ĺ	C	Rental inc or (loss)	6c		,684			0.604		0.604	
	d 7a	Net rental incom Gross amount from	e or (Id	T		1 (1)	Oth	9,684		9,684	
		sales of assets		(i) Secuntie		(1)	Other				
	_	other than inventory	7a			 		-			
Other Revenue	b	Less cost or other	76								
eve		basis and sales exps	7b 7c			 					
ŗŖ	_	Gain or (loss) Net gain or (loss)		L		1					
the	d Pa	Gross income from	•	icina ovonte							
0	Оđ	(not including \$	iuiiuiai	ising events							
		of contributions rep	ortod o	n line 1c\							
		See Part IV, line 18		ir line 10)	8a						
	b	Less direct expe			8b						
	c	Net income or (Id		om fundraising e			•		· · · · · · · · · · · · · · · · · · ·		
		Gross income from	•	•							
		See Part IV, line 19	-	,	9a						
	ь	Less direct expe			9b						
		Net income or (lo		om gaming activ	ıtıes		<u> </u>				
		Gross sales of in	•								
		returns and allow			10a						
1	b	Less cost of goo	ds sol	d	10b						
		Net income or (lo			$\overline{}$		>				
s							Business Code				
g a	11a	PRINTING A	ND PU	BLISHING		[6,923	6,923		
Miscellaneous Revenue	b	OTHER INCOM	Æ					113	113		
e e	C					[
žĘ.	d	All other revenue				[· · · · · · · · · · · · · · · · · · ·	<u></u>
		Total. Add lines	11a -1	1d			•	7,036			
	12	Total revenue.	See ins	structions			>	473,879	30,361	9,684	0

Part IX Statement of Functional Expenses

	Check if Schedule O contains a respi	(A)	IIS PAIT IA	(C)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service	Management and	Fundraising expenses
	<u> </u>		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
2	and domestic governments See Part IV, line 21 Grants and other assistance to domestic				***************************************
2	*·····				
•	Individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	-			
•	trustees, and key employees				
6	Compensation not included above to disqualified				
Ü	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	İ			
7	Other salaries and wages	63,356	63,356		
8	Pension plan accruals and contributions (include		33,333		
•	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	1,361	1,361		
10	Payroll taxes	4,847	4,847		
11	Fees for services (nonemployees)				·
		}			
b		2,539	2,539		
C	Accounting	2,384	2,384		
d					
e			•		
f	Investment management fees				
g					
J	(A) amount, list line 11g expenses on Schedule O)	,			
12	Advertising and promotion				
13	Office expenses	60,036	60,036		
14	Information technology				
15	Royalties				
16	Occupancy	59,617	59,617		
17	Travel	1,295	1,295		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				_ ·
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	13,708	13,708		
23	Insurance	6,010	6,010		
74	Uther expenses Itemize expenses not covered	·			
	above (List miscellaneous expenses on line 24e If		in minima		
	line 74é amount exceeds 10% of line 25, column	, d., , ,, , , , , , , , , , , , , ,			
	(A) amount, list line 24e expenses on Schedule O)		. 10	. 10 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1	200 (000,000,000 000 (000,000
а	MERCHANDISE	1,825	1,825		
b	TAXES - 990T	1,824	1,824		
С	MISCELLANEOUS EXPENSE	1,613	1,613		
d	BANK CHARGES	300	300		
е	All other expenses	36	36		
<u> 25</u>	Total functional expenses. Add lines 1 through 24e	220,751	220,751	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2019) CHRISTIAN UNITY PRESS

N UNITY PRESS **-**3259

P	rt X	Balance Sheet						
		Check if Schedule O contains a response or r	note to a	any line	this Part X			r
						(A)		(B)
						Beginning of year		End of year
	1	Cash—non-interest-bearing				125,776	1	537,163
		Savings and temporary cash investments				1,193,028	2	1,054,157
	3	Pledges and grants receivable, net					3_	300
	4	Accounts receivable, net	•			3,894	. 4	300
	5	Loans and other receivables from any current or for	mer offic	cer, di	or,			
		trustee, key employee, creator or founder, substanti	al contri	ibutor,	35%		_	[
		controlled entity or family member of any of these pe					5	
		Loans and other receivables from other disqualified					_	ŧ
ध		under section 4958(f)(1)), and persons described in	section	4958(3)(B)		6	
Assets		Notes and loans receivable, net				50.005	7	77 074
۷	8	Inventories for sale or use				78,907	8	77,874
}	9	Prepaid expenses and deferred charges	,			-	9	176
ļ		Land, buildings, and equipment cost or other		- }	400 000			
		basis Complete Part VI of Schedule D	}-	10a	409,203			016 004
	b	Less accumulated depreciation	L	10b	192,309	230,603		216,894
- 1		Investments—publicly traded securities					11	
[Investments—other securities See Part IV, line 11					12	
		Investments—program-related See Part IV, line 11					13	
		Intangible assets					14	·
		Other assets See Part IV, line 11				1 630 000	15	1 006 E6A
$\overline{}$		Total assets. Add lines 1 through 15 (must equal lin	ne 33)			1,632,208	16	1,886,564
		Accounts payable and accrued expenses				2,266	17	3,425
		Grants payable				434	18	724
- 1		Deferred revenue				434	19	123
- 1		Tax-exempt bond liabilities					20	
		Escrow or custodial account liability Complete Part				· · · · · · · · · · · · · · · · · · ·	21	
es		Loans and other payables to any current or former o						
≝		trustee, key employee, creator or founder, substantia		ibutor,	35%			
Liabilities		controlled entity or family member of any of these pe					22	
		Secured mortgages and notes payable to unrelated	-				23	
- 1		Unsecured notes and loans payable to unrelated thir					24	
- 1		Other liabilities (including federal income tax, payabl						
- [parties, and other liabilities not included on lines 17-	24) Coi	mpiete	Χл	221	25	
		of Schedule D				2,921	26	4,149
\dashv		Total liabilities. Add lines 17 through 25		$\overline{}$		2,321	20	1,110
ړ		Organizations that follow FASB ASC 958, check	nere 🖊					
ဦ		and complete lines 27, 28, 32, and 33. Net assets without donor restrictions			!		27	İ
ॿ		Net assets with donor restrictions					28	
8		Organizations that do not follow FASB ASC 958,	chack	horo	$[\vec{\mathbf{x}}]$			
١		and complete lines 29 through 33.	, check	Here				
5							29	
हैं		Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipn	ment fire	nd		10,500	30	10,500
SSE		Paid-in or capital surplus, or land, building, or equipli Retained earnings, endowment, accumulated incom				1,618,787	31	1,871,915
	J1		io, or oti	iici lul		1,629,287	32	1,882,415
~ I	32	Total net assets or fund balances						

Form **990** (2019)

Form **990** (2019)

Form	990 (2019) CHRISTIAN UNITY PRESS ##-##3259			Page 12
Pa	ert XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,879
2	Total expenses (must equal Part IX, column (A), line 25)	2		0,751
3	Revenue less expenses Subtract line 2 from line 1	3		<u>3,128</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,62	9,287
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain on Schedule O)	9		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line			
	32, column (B))	10	1,88	<u>32,415</u>
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			
				Yes No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		_	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			1
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
	reviewed on a separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			
	separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	
	If the organization changed either its oversight process or selection process during the tax year, explain on			
	Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the			
	Single Audit Act and OMB Circular A-133?		3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	

OMB No 1545-0047

SCHEDULE 'A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete If the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt chantable trust

.

2019

Schedule A (Form 990 or 990-EZ) 2019

Quen to Public

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Employer Identification number Name of the organization CHRISTIAN UNITY PRESS **-**3259 Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 9 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross 10 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 X 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 |X| 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. 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. 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. 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. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) Is the organization (vi) Amount of (i) Name of supported (v) Amount of monetary (II) EIN (III) Type of organization listed in your governing support (see other support (see organization (described on lines 1-10 above (see instructions)) document? instructions) instructions) (A) GERMAN MINISTERIAL ASSEMBLY OF THE CHURCH OF X 1 (B) (C) (D) (E)

Total

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

Part VI how the organization meets the "xacts-and-circumstances" test. The organization qualifies as a publicly supported

10%-facts-and-circumstances test-2018. 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

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

instructions

organization

supported organization

*	*	_	*	*	*	3	2	5	¢
••	••	_	**	•••			_		- 3

Caba	edule A (Form 990 or 990-EZ) 2019 CHI	RISTIAN UN	TTY PRESS		* *	-***3259	Page 3
, ,	artill Support Schedule for O	rganizations D	escribed in Se	ection 509(a)(2	2)		7
	(Complete only if you che If the organization fails to	cked the box or qualify under the	n line 10 of Par ne tests listed b	t I or if the orga elow, please co	inization failed omplete Part II.	to qualify under .)	Part II
Sec	tion A. Public Support	<u> </u>					
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	(4, 2070	(3, 23, 3	(3,-3)	(4) = 0.1		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						÷11/2
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6)						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016 /	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						_
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	/					
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)			•			
13	Total support. (Add lines 9, 10c, 11, and 12)	/					
14	First five years. If the Form 990 is for the	organization's first	second third fourth	or fifth tax year a	s a section 501(c)(3)	
	organization, check this box and stop here			, or martax year a			▶ □
	tion C. Computation of Public Su			(6)		14.1	
15	Public support percentage for 2019 (line 8,			(1))		15	<u>%</u> _
16 Soo	Public support percentage from 2018 Sche					16	<u>%</u>
	tion D. Computation of Investme			roluma (f)		17	%
7	Investment income percentage for 2019 (lin			olullin (t))		18	<u> </u>
8 02	Investment income percentage from 2018 \$ 33 1/3% support tests—2019. If the organ			4 and line 15 is mo	re than 33 1/3%	L	
Ja		.,_a.,,,,, aid 110t 6116t	DOX OH IIIC 1	., una mie 10 io 1110	,, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 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

Part IV **Supporting Organizations**

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

Section A. A	II Supporting	Organizations

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

	,	
	Yes	No
1	х	
2		x
		х
3a		- 11
3b		
3с		
4a		х
4b_		
4c		
5a		х
5b		
5c		
		x
6		Α
7		x
8		х
9a		x
9b		х
9с		x
10a		x
10b		
(Form 99	0 or 990-	EZ) 2019

Sched	ule A (Form 990 or 990-EZ) 2019 CHRISTIAN UNITY PRESS	<u>**-***3259</u>		Page
Pa	rt·IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a	ــــــ	X
b	A family member of a person described in (a) above?	11b	ļ	X
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	<u> </u>	X
Sect	ion B. Type I Supporting Organizations			
		f	Yes	No
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	1	X	ļ
2	Did the organization operate for the benefit of any supported organization other than the supported		1	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carned out the purposes of the supported organization(s) that operated,	ļ	1	
8004	supervised, or controlled the supporting organization	2	l	X
Sect	ion C. Type II Supporting Organizations			
_		F	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed		1	1
Saat	the supported organization(s)		L	L
Seci	on D. All Type III Supporting Organizations		Т	T
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		1	
~	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	ļ	ļ
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
•	the organization maintained a close and continuous working relationship with the supported organization(s)	2	 	
3	By reason of the relationship described in (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," describe in Part VI the role the organization's			
Secti	supported organizations played in this regard on E. Type III Functionally-Integrated Supporting Organizations	3	L	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	nstructions)		
a b	The organization satisfied the Activities Test Complete line 2 below			
c	The organization is the parent of each of its supported organizations. Complete line 3 below			
·	The organization supported a governmental entity Describe in Part VI how you supported a government entity	y (see instructions)		
2 A	ctivities Test Answer (a) and (b) below.		Yes	NI.
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		res	No
_	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	_Za		
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		1	
	reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	31	1	
3	Parent of Supported Organizations Answer (a) and (b) below.	2b		
з a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
4	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		1	
ь	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3a		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	,	1	
	or its supported organizations in res, describe in rait VI the role played by the organization in this regard	3b [

Schedule A (Form 990 or 990-EZ) 2019 CHRISTIAN UNITY PRESS		**-***3	259 Page 6
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga			
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov			
instructions. All other Type III non-functionally integrated supporting organizations must	complete	Sections A through E	·
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		· · · · · · · · · · · · · · · · · · ·
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Pnor Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year)			· · · · · · · · · · · · · · · · · · ·
a Average monthly value of secunties	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		······································
e Discount claimed for blockage or other		I	
factors (explain in detail in Part VI)		^	
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	. <u> </u>	
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		·
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to		.,,	
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionally integrated Ty	pe lil sur	oporting organization (see	
instructions)			

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Page 7

Par	Type III Non-Functionally Integrated 509(a)(3) Si	upporting Organizati	ons (continued)	
Secti	on D - Distributions			Current Year
. 1	Amounts paid to supported organizations to accomplish exempt purposes			
2	Amounts paid to perform activity that directly furthers exempt purposes of			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of supporter	ed organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organization	n is responsive		
	(provide details in Part VI) See instructions			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
		(i)	(ii)	(iii)
_	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2019	Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019			
	(reasonable cause required-explain in Part VI) See			
	ınstructions			
3	Excess distributions carryover, if any, to 2019	***************************************	***************************************	
a	From 2014			
b	From 2015		·	***************************************
С	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount		***************************************	
i	Carryover from 2014 not applied (see instructions)			
i_	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2019 from			
	Section D, line 7 \$			••••
a	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
С	Remainder Subtract lines 4a and 4b from 4			
5	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			
6	Remaining underdistributions for 2019 Subtract lines 3h			
•	and 4b from line 1 For result greater than zero, explain in			
	Part VI See instructions			
7	Excess distributions carryover to 2020. Add lines 3j			
•	and 4c			
8	Breakdown of line 7			
	Excess from 2015		***************************************	
_				
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
<u>e</u>	Excess from 2019	<u> </u>	Schedule	A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019 Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b; Part Part·VI III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1; Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions.)

SCHEDULE'D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990.

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

2019
Open to Public Inspection

Employer identification number Name of the organization **-***3259 CHRISTIAN UNITY PRESS Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year 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? 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? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) 1 Preservation of a historically important land area Preservation of land for public use (for example, recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a a Total number of conservation easements 2b **b** Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes No and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 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 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

	GUDTOMT"	N INTERV PRESS		**-**	3250	Da
hedule D (Form 990) 20 Part III Organi		N UNITY PRESS g Collections of Art,	Historical Treasures			Page (continued)
		on, and other records, check				(commucu)
collection items (che		on, and other records, ones	any or the following that he	ano oigoz aoi		
Public exhibition		d Loan	or exchange program			
b Scholarly resear		e Other				
-	future generations	<u> </u>				
		ellections and explain how th	ey further the organization's	exempt purpose	ın Part	
XIII	.	·				
During the year, did	the organization solicit o	r receive donations of art, hi	storical treasures, or other	sımılar		
assets to be sold to	aise funds rather than to	be maintained as part of th	e organization's collection?	. <u></u>		Yes No
	and Custodial Ar					
Comple	te if the organizatio	n answered "Yes" on I	Form 990, Part IV, line	e 9, or reported	d an amount o	on Form
990, Pa	rt X, line 21			"-		
a is the organization a	n agent, trustee, custodi	an or other intermediary for	contributions or other asset	s not		
ıncluded on Form 99	•					Yes No
o If "Yes," explain the	arrangement in Part XIII	and complete the following	able			
						Amount
Beginning balance					1c	
Additions during the	year				1d	
Distributions during	he year				1e	
Ending balance		200 5			1f	T Van D Na
•		orm 990, Part X, line 21, for		•		Yes No
Trought to the same of the sam	ment Funds.	Check here if the explanation	on has been provided on Pa	III AIII		
		n answered "Yes" on I	Form 990 Part IV line	10		
Сотприс	.o ii tilo organizatio	(a) Current year			l) Three years back	(e) Four years back
Beginning of year ba	lance				-	
Contributions						
Net investment earn	ngs, gains, and					
losses						
Grants or scholarshi	ps [
Other expenditures t	or facilities and					
programs						
f Administrative exper	ses					
End of year balance	L					1
Provide the estimate	d percentage of the curre	ent year end balance (line 1	g, column (a)) held as:			
Board designated or	•	%				
Permanent endowm						
Term endowment	%					
	lines 2a, 2b, and 2c sho					
	t funds not in the posses	ssion of the organization tha	are held and administered	for the		[]
organization by						Yes No
(i) Unrelated organ						3a(i)
(ii) Related organiza			ahadula D2			3a(ii)
		itions listed as required on S				3b
	uildings, and Equ	organization's endowment t	unus			
		n answered "Yes" on F	form 990 Part IV line	11a See For	m 990 Part X	line 10
	of property	(a) Cost or other basis	(b) Cost or other basis	(c) Accumu		(d) Book value
203a,piloi	V	(investment)	(other)	deprecia		
n Land			23.94	1 7 7 7 7		23.941

Part VI La

Co 1a Land 211,713 27,891 183,822 **b** Buildings c Leasehold improvements 173,549 164,418 9,131 d Equipment e Other Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c) 216,894

Part VII	Investments – Other Securities. Complete if the organization answered "Yes"	" on l	Form 990. Part IV. lin	e 11b See Form 990, F	Part X, line 12
	(a) Description of security or category		(b) Book value	(c) Method o	
	(including name of security)			Cost or end-of-ye	ear market value
(1) Financial of	derivatives				
	ld equity interests				
(3) Other	·; ···································				
(A)					
(B)					
(C)				-	
(O) (D)					-
				<u> </u>	
(E)				 	
(F)				 	
(G)				 	
(H)	- (h)tt Farm 000 Part V and (P) Imp 12.)				
Part VIII	n (b) must equal Form 990, Part X, col (B) line 12) Investments – Program Related.			1	
rait viii	Complete if the organization answered "Yes'	" on I	Form 990 Part IV lin	e 11c See Form 990 P	art X line 13
	(a) Description of investment	OIT	(b) Book value	(c) Method of	
	(a) Description of investment		(w) Book Value	Cost or end-of-ye	
(1)					
(2)				<u></u>	
(3)			<u> </u>		
(4)					
(5)					
(6)					
(7)				ļ	
(8)					
(9)					
	(b) must equal Form 990, Part X, col (B) line 13)	<u> </u>	L.,		<u> </u>
Part IX	Other Assets.				
	Complete if the organization answered "Yes"		orm 990, Part IV, line	e 11d See Form 990, P	
	(a) Description	<u> </u>			(b) Book value
(1)					<u> </u>
(2)					
(3)					
(4)					
(5)	<u>.</u>				
(6)					
(7)					
(8)					
(9)	(1) 15 000 Part V and (D) (1) 45 1				
	(b) must equal Form 990, Part X, col (B) line 15)			<u>P</u>	_
Part X	Other Liabilities. Complete if the organization answered "Yes"	oni	Form 000 Part IV line	a 11a or 11f Coa Form	000 Port Y
	line 25.	Oili	-Omi 990, Fait IV, iiii	a rie di ili dee roili	330, Fait A,
	(a) Description of liability			······	(b) Book value
	ncome taxes				(-)
(2)	neome taxes	_			
(3)			,		
(4)					
(5)					
(6)					
(7)					
(8)	· · ·			·	
(9)					
	(b) must equal Form 990, Part X, col (B) line 25)			•	
	uncertain tax positions. In Part XIII, provide the text of the fo	ootno	te to the organization's final	ncial statements that reports the	ne
	lability for uncertain tax positions under FASB ASC 740 CI		-		

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chedule D (Form 990) 2019	CHRISTIAN	UNITY	PRES

che	edule D (Form 990) 2019 CHRISTIAN UNITY PRESS	**~	<u>**</u> *3259	Page 4
Pa	Reconciliation of Revenue per Audited Financial State	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.		
	Complete if the organization answered "Yes" on Form 990	0, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
Pa	art XII Reconciliation of Expenses per Audited Financial Sta	tements With Expens	ses per Return.	-
	Complete if the organization answered "Yes" on Form 990	0, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	

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

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

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Page 5

Part XIII Supplemental Information (continued)

SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

CHRISTIAN UNITY PRESS

Employer identification number

-*3259

FORM 990, PART III - ADDITIONAL INFORMATION PRINTING OF RELIGIOUS PUBLICATIONS

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS
PRINTING & PUBLICATION OF RELIGIOUS MATERIALS

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS

THE CORPORATION HAS OTHER PERSONS WHO HAVE THE POWER TO APPOINT MEMBERS OF

THE GOVERNING BODY.

FORM 990, PART VI, LINE 7B - DECISIONS SUBJECT TO APPROVAL OF MEMBERS
PERSONS OTHER THAN THE GOVERNING BODY HAVE THE ABILITY TO ACCEPT OR REJECT
DECISIONS MADE AT THE ANNUAL MEETING.

FORM 990, PART VI, LINE 9 - OFFICERS WHO CANNOT BE REACHED
GEORGE SIPPERT
2123 SKIPPING STONE TRAIL
FLUSHING, MI 48433

HARRY SEMENJUK

5330 - 42 STREET

WESTASKIWIN, CA T9A 0M8

KURT PUDEL

6319-35 AVE NW

Schedule O (Form 990 or 990-EZ) (2019)

Name of the organization

Employer identification number CHRISTIAN UNITY PRESS

-*3259

EDMONTON, CA T6L 1G5

DAVID GOERTZEN

2403 S ELMS RD

SWARTZ CREEK, MI 48473

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 NO REVIEW WAS OR WILL BE CONDUCTED.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC ON REQUEST.