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# Form **990-EZ**

# Short Form Return of Organization Exempt From Income Tax

0044

2014

OMB No. 1545-1150

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

Open to Public

Inspection

Department of the Treasury Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

A For the 2014 calendar year, or tax year beginning 2014, and ending C Name of organization B Check if applicable D Employer identification number Address change Reaching Africa's Unreached 46-0799429 Name chance Room/suite Number and street (or P O. box, if mail is not delivered to street address) E Telephone number Initial return 830-556-1547 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Amended return Number ▶ Application pending Seguin, Texas 78156 G Accounting Method: ✓ Cash ☐ Accrual Other (specify) H Check ▶ ☐ if the organization is not reachingafricasunreached.com required to attach Schedule B J Tax-exempt status (check only one) — 

501(c)(3) 

501(c) (€) (Form 990, 990-EZ, or 990-PF). ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527 K Form of organization: Corporation Trust Association Other L Add lines 5b. 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II. column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ . . . . . . . . . . . . . . . . \$161.800.00 Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I. \$161,800.00 2 Program service revenue including government fees and contracts 2 -0-3 Membership dues and assessments . . . . . . . . . . . . . . . 3 -0-4 4 -0-5a Gross amount from sale of assets other than inventory . . . Less; cost or other basis and sales expenses . . . . . . 5b Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . 5c -0-Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than Revenue Gross income from fundraising events (not including \$ -0- of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . . 6b Less: direct expenses from gaming and fundraising events . . . Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract 6d -0-7a Gross sales of inventory, less returns and allowances . . . -0-Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c -0-8 Other revenue (describe in Schedule O) . . . . . . 8 -0-9 **Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 . . . 9 \$161,800.00 Grants and similar amounts paid (list in Schedule O) 10 10 \$123,265.00 11 Benefits paid to or for members . . . . . . . . 11 -0-12 12 Salaries, other compensation, and employee benefits . . . <u>-0-</u> 13 Professional fees and other payments to independent contractors 13 <u>-0-</u> 14 Occupancy, rent, utilities, and maintenance . . . . . . 14 -0-15 Printing, publications, postage, and shipping . . . 15 -0-16 Other expenses (describe in Schedule O) . . . . . . 16 \$280.00

Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . . . . . . . . . . . . . .

Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with

Other changes in net assets or fund balances (explain in Schedule O) . . . . Net assets or fund balances at end of year. Combine lines 18 through 20 . .

For Paperwork Reduction Act Notice, see the separate instructions.

Total expenses. Add lines 10 through 16 .

17

18

19

Cat. No. 10642I

Form 990-EZ (2014)

\$123,545.00

\$38,255.00

\$1,365.00

\$39,620.00

17

19

20

Form	990-EZ	(2014)

Page 2

Par	t II Balance Sheets (see the instructions f	or Part II)		-		
	Check if the organization used Schedule	O to respond to ar	ny question in this	Part II		🗆
				(A) Beginning of year		(B) End of year
22	Cash, savings, and investments			1,365.00	22	\$39,620.0
23	Land and buildings				23	-0
24	Other assets (describe in Schedule O)			-0-	24	-0
25	Total assets			1,365.00	25	\$39,620.0
26	Total liabilities (describe in Schedule O)				26	-0
27	Net assets or fund balances (line 27 of column	(B) must agree with	n <u>line</u> 21)	1,365.00		\$39,620.0
Par	III Statement of Program Service Accom	<b>plishments</b> (see th	e instructions for	Part III)		
	Check if the organization used Schedule	O to respond to ar	ny question in this	Part III 🗹	_	Expenses
What	is the organization's primary exempt purpose?	Missionary Work in U	Jganda, S. Sudan, a	nd D.F. Congo		quired for section (c)(3) and 501(c)(4)
as m	ribe the organization's program service accompli- easured by expenses. In a clear and concise mons benefited, and other relevant information for ea	anner, describe the				anizations; optional for
28	Grants to NGO "RAU - Africa" for Gospel Ministry: Pa	astoral training, evan	gelism and disciple	ship outreaches,		
	and literature. All literature and Bibles are translated					
	by helping training local ministers and travels many	miles providing bible	s and spritual track	s. 1000s benefited.		
	(Grants \$ 69,028.00) If this amount	includes foreign gra	ints, check here .	▶ ☑	28a	\$69,028.0
29	Grants to NGO "RAU-Africa" for Mercy Ministry: Ref	ugee relief (foods an	d meds), child corre	ctive surgeries,		
	and local health aid and medical assistance. The Organical Action 2015	g's Pres., works with	the NGO to provide	funds for		
	medicines, cleff palate & lip, congenital cataracts, hy	drocephalus and oth	er small surgeries.	100s benefited.	ì	
	(Grants \$ 9,862.00) If this amount	includes foreign gra	ints, check here .	▶ 🗹	29a	\$9,862.0
30	Grants to NGO "RAU-Africa" for Buildings & Improve	ments: Church, Sch	ool, Training, and M	ledical facilities.		
	The Org's Pres., works with the NGO to provide fund					
	to accomplish the Gospel Ministry and Mercy Ministry					
	(Grants \$ 44,375.00) If this amount		ints, check here .	▶ 🗹	30a	\$44,375.0
31	Other program services (describe in Schedule O)					
		includes foreign gra			31a	a -c
32	Total program service expenses (add lines 28a	through 31a)		•	32	<del></del>
Par						T.20/250.0
	Check if the organization used Schedule			•		سيئم
	3	(b) Average	(c) Reportable	(d) Health benefits,		
	(a) Name and title	hours per week devoted to position	compensation (Forms W-2/1099-MIS (if not paid, enter -0-		1	Estimated amount o other compensation
Jacol	Lee					
<u>Presi</u>	dent & Treasurer	<65 hr per week		)	D-	-0
Dr. Ja	ock Deetjen					
Vice-	President & Secretary	>1 hr per week		)	0-	-0-
Mike	Mercer	<u> </u>			1	
Direc	tor & Assistant Secretary	>1 hr per week	-(	)-	0-	
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Part	Other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V) Check if the organization used Schedule O to respond to any question in this			
	instructions for Part V/ Orleck in the organization used Schedule O to respond to any question in this	Part	v Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	163	NO ✓
	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)			<u> </u>
	change on Schedule O (see instructions)  Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	34		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35a 35b	<b>-</b>	<b>✓</b>
	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		<b>✓</b>
	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a -0-			
	Did the organization file <b>Form 1120-POL</b> for this year?	37b 38a		<b>√</b>
b	If "Yes," complete Schedule L, Part II and enter the total amount involved   38b			
39	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on line 9			
	Gross receipts, included on line 9, for public use of club facilities	-		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶o; section 4912 ▶o; section 4955 ▶o			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		<b>√</b>
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		<b>√</b>
41	List the states with which a copy of this return is filed ▶ None, Not required to file in Texas			
42a	9	830-37		D
	Located at ► 395 Lifegate Lane, Seguin, Texas 78155 ZIP + 4 ►  At any time during the calendar year, did the organization have an interest in or a signature or other authority over	78	155	
b	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country:	42b		No √
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
C	At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country: ▶	42c		✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the tax year		Yes	► □
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	163	No.
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		<b>√</b>
	Did the organization receive any payments for indoor tanning services during the year?	44c 44d		<b>√</b>
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		1
	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," Form 990 and Schedule R may need to be completed instead of Form 990-FZ (see instructions)	45h		

er's signature

Type or print name and title

► Kolb & Murray, P.C.

May the IRS discuss this return with the preparer shown above? See instructions

Firm's address ➤ 515 East Court Street, Ste 100, Sequin, Texas 78155

Print/Type preparer's name

**Kevin Kolb** 

Firm's name

Paid

Preparer

**Use Only** 

P00530456

74-2770231

830-303-1099

Check If

self-employed

Firm's EIN ▶

Phone no.

5-30-1S

#### **SCHEDULE A** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-FZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Open to Public

Inspection Name of the organization Employer identification number Reaching Africa's Unreached 46-0799429 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is; (For lines 1 through 11, 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.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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.) ☐ An organization that normally receives: (1) more than 331/3% 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 331/3% 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.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. 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 functionally integrated, or Type III non-functionally integrated supporting organization. Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (IV) is the organization (v) Amount of monetan (vi) Amount of listed in your governing (described on lines 1-9 support (see other support (see above or IRC section. instructions) instructions) (see instructions)) Yes No (A) (B) (C) (D) (E)

Schedule A (Form 990 or 990-EZ) 2014 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . \$14.836.00 \$161,800.00 \$176,636.00 levied revenues organization's benefit and either paid to or expended on its behalf . . . -0-<u>-0-</u> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . Total. Add lines 1 through 3. . . . \$14,836.00 \$161,800.00 \$176,636.00 The portion of total contributions by each person (other than governmental unit or vloildug supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . \$5,268.00 Public support. Subtract line 5 from line 4. \$171,368.00 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total Amounts from line 4 . . . . . . \$14,836.00 \$161,800.00 \$176,636.00 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar sources . . . . . . . . . . . . -0--Q-Net income from unrelated business activities, whether or not the business is regularly carried on . . . . . -0--0-Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . . . . -0-Total support. Add lines 7 through 10 11 \$176,636.00 12 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) 13 Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f) . . . . % 14 Public support percentage from 2013 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . . . 15 15 % 331/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 16a box and stop here. The organization qualifies as a publicly supported organization . . . . . . . . . . . . . . . . . . 331/3% support test-2013. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization . . . . . . . . . 10%-facts-and-circumstances test-2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test - 2013. 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  

#### 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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number

Open to Public Inspection

Reaching Africa's Unreached	46-0799429			
990-EZ: Part 1; Line 10 - "Grants and similar amounts paid":				
List of Grants: \$123,265 to "Reaching Africa's Unreached" a Ugandan NGO, Certificate of Incorporation number is #119626 (6.16.2010).				
990-EZ: Part I: Line 16: Other Expenses: Bank Service Charges:\$280.00				
990-EZ: Part I: Line 10 & Part III: "Statement of Program Service Accomplishments"				
Accounting for Foreign Grants: The Organization (RAU-America) makes grants primarily to a Ugandar	n NGO non-profit named			
"Reaching Africa's Unreached" (RAU-Africa). RAU Africa has three Board of Directors, two of which a	re Ugandan citizens and Christian			
Ministers. The third Board of Directos is the President of this Org (RAU-America), Jacob Lee. RAU-Ar	nerica has sent Jacob Lee to Uganda as			
a full-time missionary to ensure that RAU-Africa spends the grants for the purposes that the grant was	intended. Jacob Lee keeps track			
of all RAU-America grant money by maintaining records and expense reports and periodically reports	and accounts for all RAU-America's			
grant money to RAU-America's Board of Directors. All grants by RAU-America are subject to strict rev	riew as set forth in RAU-America's			
By-Laws.				
990EZ: Part I: Line 10 & Part III: "Statement of Progarm Service Accomplishments" Lines 28, 29, and 30	<u>D.</u>			
RAU-America has as one of its primary missions, the goals of contacting unreached people in North U	ganda, South Sudan, and D.R. Congo			
with the Gospel of Jesus Christ. To that end, RAU-America makes grants for "Gospel" & "Mercy" Minist	ries & for "Buildings & Improvements"			
necessary to accomplish these mission goals. Grants have been made to RAU-AFrica to buy land and	d build the Hall of Tyrannus.			
The Hall of Tyrannus and surrounding structures provides a safe place for Training, Medical Care, Sch	ooling, Living, Farming and as a			
Refugee Center. The Hall of Tyrannus also serves as a base for evangelism and gospel outreach. The	area serviced by RAU-Africa is vast			
and the grants made by RAU-America help to cover the costs of land travel, medicine, surgeries, bible	s, and other needs of the local people.			
Great effort is made to strengthen local Christian churches and their leaders and in areas where there	are no Christian churches, church			
plants exalting Christ are attempted.				
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