ANNED AUG 2 9 2019

Form **990-EZ**

Short Form
Return of Organization Exempt From Income Tax

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

2018

OMB No 1545 1150

Department of the Treasury Internal Revenue Service ► Do not enter social security numbers on this form as it may be made public.

► Go to www.irs.gov/Form990EZ for instructions and the latest information.

Öpen to Public Inspection

| Α | For t | he 2018 calendar year, or tax year beginning , 2018, and ending | • | | | |
|------------|------------|--|--------------------------------------|-------------|--|--|
| В | Check | ıf applicable C | D Employer identification number | _ | | |
| | Addres | ss change | 26-2493387 | | | |
| <u></u> | | change Global Banjara Baptist Ministries International, Inc. | Telephone number | | | |
| | Initial | IP 0 Box 248 | 254-749-5468 | | | |
| Ļ | (| Unryteminated Leo. IN 46765 | | | | |
| ㅏ | : | ded return Sation pending | F Group Exemption Number ► | | | |
| Ğ | Acco | ounting Method X Cash Accrual Other (specify) ► H Check | ► If the organization is not | t | | |
| 1 | Web | site: www.gbbmi.org require | d to attach Schedule B | | | |
| J | Tax-e | exempt status (check only one) $- \mathbb{X} = 501(c)(3) = 501(c)(3)$ (Form Section 1) $- 4947(a)(1)$ or $- 527$ (Form Section 2) | 990, 990-EZ, or 990-PF) | | | |
| K | | n of organization X Corporation Trust Association Other | | | | |
| L | asse | lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if to ts (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ | ►\$ 187,63 | <u> 15.</u> | | |
| Pa | art F | Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the ins | tructions for Part I) | 177 | | |
| | | Check if the organization used Schedule O to respond to any question in this Part I | | X | | |
| | 1 | Contributions, gifts, grants, and similar amounts received CEIVED | 1 177,86 | <u>4.</u> | | |
| | 2 | Program service revenue including government fees and contracts | 2 | | | |
| | 3 | Membership dues and assessments Investment income MAY 2 0 2019 | 3 | | | |
| | 4 | Investment income | 4 | | | |
| | 1 | Gross amount from sale of assets other than inventory | | | | |
| | 1 | Less cost or other basis and sales expenses OGDEN, UT 5b | | | | |
| | 1 | Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) | 5 c | | | |
| a) | | Gaming and fundraising events | | | | |
| Revenue | 1 | Gross income from gaming (attach Schedule G if greater than \$15,000) 6a | | | | |
| Š | 6 | of contributions of contributions from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum | | | | |
| Re | | of such gross income and contributions exceeds \$15,000) | | | | |
| | c | : Less direct expenses from gaming and fundraising events 6 c | | | | |
| | d | Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) | 6 d | | | |
| | 7 a | Gross sales of inventory, less returns and allowances 7 a 9, 7 | 71. | | | |
| | b | Less. cost of goods sold 7 b 1,83 | 39. | | | |
| | C | Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) | 7c 7,93 | 12. | | |
| | 8 | Other revenue (describe in Schedule O) | 8 | | | |
| | 9 | Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 | ► 9 185,79 | | | |
| | 10 | Grants and similar amounts paid (list in Schedule O) See Schedule O | 10 139,55 | <u>8.</u> | | |
| | 11 | Benefits paid to or for members | 11 | | | |
| | 12 | Salaries, other compensation, and employee benefits | 12 | | | |
| ses | 13 | Professional fees and other payments to independent contractors | 13 3,76 | <u> 55.</u> | | |
| ens | 14 | Occupanty rent, utilities, and maintenance | 14 | | | |
| Expenses | 15 | Printing, publications, postage, and shipping Other emerges (describe in Schedule O) See Schedule O | 15 | | | |
| | 16 | Other expenses (describe in Scheddie O) | 16 10,79 | | | |
| | 17 | Total expenses. Add lines 10 through 16 | ► 17 154,11 | | | |
| Ś | 18 | Exces (deficit) for the year (Subtract line 17 from line 9) | 18 31,68 | 11. | | |
| Net Assets | 19 | Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-ye | ear 10 22 77 | , 0 | | |
| t As | 20 | figure reported on prior year's return) | 19 33,77 | <u>9.</u> | | |
| Š | 20 | Otherchanges in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year Combine lines 18 through 20 | | <u></u> | | |
| P V | 21 4 Fo | r Paperwork Reduction Act Notice, see the separate instructions. | ► 21 65,46 Form 990-EZ (20 | | | |

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Form **990-EZ** (2018)

Form 990-EZ (2018) Global Banjara Baptist Ministries

BAA

| Form 990-EZ (2018) | Global | Baniara | Bantist | Ministries |
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| 33 Did the organization engage in any significant activity not previously reported to the IRS? | | Yes | No |
|--|--|-------------|-----------------------------|
| If 'Yes,' provide a detailed description of each activity in Schedule O | 33 | | X |
| 34 Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents if they reflect | 74 | | 7, |
| a change to the organization's name Otherwise, explain the change on Schedule O. See instructions. 35 a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities. | 34 | | X |
| (such as those reported on lines 2, 6a, and 7a, among others)? | 35 a | | Х |
| 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 | 35 b | | |
| c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, | 2= | | |
| reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III | 35 c | | X |
| 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 | | X |
| 37 a Enter amount of political expenditures, direct or indirect, as described in the instructions 0. | | | |
| b Did the organization file Form 1120-POL for this year? | 37 b | | X |
| 38 a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? | 38 a | | Х |
| b If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38 b N/A | | | |
| 39 Section 501(c)(7) organizations Enter: | 1 | | |
| a Initiation fees and capital contributions included on line 9 | -t | | |
| b Gross receipts, included on line 9, for public use of club facilities. 39 b N/A | <u>.</u> | 1 | |
| 40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under | ŀ | | |
| section 4911 ► 0., section 4912 ► 0., section 4955 ► 0. | · · | 1 | |
| 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 | 40 b | | <u>X</u> _ |
| c 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 • 0. | - | | |
| d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization ■ 0. | _ | | |
| e 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 | 40 e | | Х |
| 41 List the states with which a copy of this return is filed > IN | | | |
| | | | |
| 42 a The organization's books are in care of Targeted Services, P.C. Located at 709 Clay Steet, Ste. 102, Fort Wayne IN ZIP + 4 46802 | 03-3 | | |
| 42 a The organization's books are in care of Targeted Services, P.C. Located at 709 Clay Steet, Ste. 102, Fort Wayne IN b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a | | 121_ Yes | No No |
| 42 a The organization's books are in care of ► Targeted Services, P.C. Located at ► 709 Clay Steet, Ste. 102, Fort Wayne IN B 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)? | 03-3 42b | | No X |
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| 42 a The organization's books are in care of Targeted Services, P.C. Located at 709 Clay Steet, Ste. 102, Fort Wayne IN ZIP + 4 46802 b 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)? If 'Yes,' enter the name of the foreign country 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 United States? If 'Yes,' enter the name of the foreign country At Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here | 42 b | | X X |
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| 42 a The organization's books are in care of Targeted Services, P.C. Located at 709 Clay Steet, Ste. 102, Fort Wayne IN JiP + 4 46802 b 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)? If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filling 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 United States? If 'Yes,' enter the name of the foreign country 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year 44 a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ | 42 b | Yes | X X N/A N/A |
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| 42 a The organization's books are in care of ► Targeted Services, P.C. Telephone no ► 260-2 Located at ► 709 Clay Steet, Ste. 102, Fort Wayne IN Zip+4 ► 46802 b 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)? If 'Yes,' enter the name of the foreign country ► 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 United States? If 'Yes,' enter the name of the foreign country ► 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year 44 a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed | 42 b 42 c | Yes | X X N/A N/A No |
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| 42 a The organization's books are in care of Targeted Services, P.C. Localed at 709 Clay Steet, Ste. 102, Fort Wayne IN 200-2 b 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)? If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filling 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 United States? If 'Yes,' enter the name of the foreign country 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year 44 a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ 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 c Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ c Did the organization receive any payments for indoor tanning services during the year? d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'Yes,' Form 990 must be completed and Form 720 to report these payments? | 42 b 42 c 44 a 44 b 44 c 44 d | Yes | X N/A N/A No X X X |
| 42 a The organization's books are in care of Targeted Services, P.C. Located at 709 Clay Steet, Ste. 102, Fort Wayne IN 2(P+4 * 46802) b 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)? If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filling 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 United States? If 'Yes,' enter the name of the foreign country 43 Section 4947(a)(1) nonexempt charitable trusts filling Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year 44 Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ 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 c Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ c Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ c Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ c Did the organization in Schedule O 45 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 42 b 42 c 44 a 44 b 44 c | Yes | X N/A N/A No X |
| 42 a The organization's books are in care of ► Targeted Services, P.C. Localed at ► 709 Clay Steet, Ste. 102 Fort Wayne IN ZIP + 4 ► 46802 b 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)? If 'Yes,' enter the name of the foreign country ► 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 United States? If 'Yes,' enter the name of the foreign country ► 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► 43 44 a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ 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 c Did the organization receive any payments for indoor tanning services during the year? If 'No,' provide an explanation in Schedule O 45 a Did the organization have 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-EZ See instructions | 42 b 42 c 44 a 44 b 44 c 44 d | Yes | X N/A N/A No X X X X |

| Form 990- | EZ (2018) Global Banjara Bapt | <u>list Ministries</u> | S | 26-249 | 93387 | _ | age 4 |
|----------------------|--|--|--|--|---------------------------|---------------|-----------------|
| | • | | | | | Yes | No |
| 46 Did the cand | he organization engage, directly or indired idates for public office? If 'Yes,' complete | ctly, in political campaig Schedule C, Part I | gn activities on behalf of | or in opposition to | 46 | | Х |
| | Section 501(c)(3) Organization All section 501(c)(3) organization for lines 50 and 51. | s Only | questions 47-49b ar | nd 52, and complet | e the table | es | |
| | Check if the organization used Schedule | e O to respond to any | question in this Part VI | | | | |
| | | | - | | _ | Yes | No |
| 47 Did the | he organization engage in lobbying activit blete Schedule C, Part II | ies or have a section 5 | 01(h) election in effect di | uring the tax year? If 'Y | es,' 47 | | Х |
| | e organization a school as described in se | | | ule E | 48 | | <u>X</u> |
| | he organization make any transfers to an | • | related organization? | | 49 a | | X |
| | es,' was the related organization a section plete this table for the organization's five t | • | emolovees (other than of | ficers directors triistee | 49 b | | |
| | oyees) who each received more than \$10 | | | | | | |
| | (a) Name and title of each employee | (b) Average hours per week devoted to position | (c) Reportable compensation (Forms W-2/1099-MISC) | (d) Health benefits, contributions to employee benefit plans, and deferred compensation | (e) Estimate other com | | |
| None | | | | | <u></u> | | |
| | | | | | | | |
| | | | | | - | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 51 Comp | number of other employees paid over \$1 plete this table for the organization's five the second control of the | nighest compensated ii | ndependent contractors v | who each received more | e than \$100, | 000 of | : |
| | pensation from the organization. If there is (a) Name and business address of each independent of | | (b) Type o | of service | (c) Comp | ensation | |
| None | (4) Name and administration of each independent | | (=) -) p = - | | (-,, | | |
| NOILE | | | | | | | |
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| | | | | | | | |
| | | | | | | - | |
| | | | | | | | |
| 52 Did th | number of other independent contractors ne organization complete Schedule A? No | • | • | •ch a | ► X Yes | | — ٦ . |
| <u>`</u> | pleted Schedule A of perjury, I declare that I have examined this return, inclu | iding accompanying schedules a | and statements, and to the best of r | ny knowledge and belief, it is | i res | | <u></u> No_ |
| true, correct, a | of perjury, I declare that I have examined this return, included complete. Declaration of preparer to their than office. | er) is based on all information | of which preparer has any know | fledge | | | |
| Sign Here | Signature of officer Willie Gome: | 2 PReside | W | Date 5/13/19 | ··· | | |
| | Type or print name and title Print/Type preparer's name | Preparer's signature | Date 5/10/1 | 9 Check I If | TIN 1780234 | 74 | |
| Paid | • | os PC | 1-77 | self-employed / | 75 | -1 | > |
| Preparer Use Only | Firm's name ► Targeted Service Firm's address ► 709 Clay Street | | | Firm's EIN | 01-0727 | 068 | |
| osc only | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | 46802 | | | -203-31 | | |
| May the IR | S discuss this return with the preparer shi | | ictions | , | ► X Yes | $\overline{}$ | No |
| | | | ······································ | | Form 99 | 0-EZ (| 2018) |

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 charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047 2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service Employer identification number Name of the organization Global Banjara Baptist Ministries 26-2493387 International, Inc. Part | 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). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g 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 I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations g Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 (v) Amount of monetary (vi) Amount of other (iv) Is the organization listed in your governing document? support (see instructions) support (see instructions) above (see instructions)) Yes No (A) (B) (C) (D) (E) Total

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)

| | organization rans to quality a | 11001 110 10010 11010 | | ompioto i art m y | | | |
|--------------|---|--|--|--|--|--|-----------------|
| Sec | tion A. Public Support | | | | | | · |
| Cale begi | ndar year (or fiscal year | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants') | 111,924. | 198,107. | 174,546. | 174,840. | 177,864. | 837,281. |
| 2 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | 0. |
| 3 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | 0. |
| 4 | Total. Add lines 1 through 3 | 111,924. | 198,107. | 174,546. | 174,840. | 177,864. | 837,281. |
| 5 | The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | 61,542. |
| 6 | Public support. Subtract line 5 from line 4 | | | | <u></u> - | | 775,739. |
| Sec | tion B. Total Support | a . | | | | | |
| Cale begi | ndar year (or fiscal year nning in) ► | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
| 7 | Amounts from line 4 | 111,924. | 198,107. | 174,546. | 174,840. | 177,864. | 837,281. |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | 17. | 66. | 2. | 2. | 5. | 92. |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | · 0. |
| 10 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) | | | | • | | 0. |
| 11 | Total support. Add lines 7 through 10 | | | | | | 837,373. |
| 12 | Gross receipts from related activity | ties, etc (see inst | ructions) | | | 12 | 0. |
| 13 | First five years. If the Form 990 is organization, check this box and | | ion's first, second, | , third, fourth, or f | ifth tax year as a | section 501(c)(3) | ▶ 🗌 |
| | tion C. Computation of Pu | <u> </u> | | | | | |
| | Public support percentage for 20 | , | `` | 11, column (f)) | | 14 | 92.64 % |
| 15 | Public support percentage from 2 | 017 Schedule A, F | Part II, line 14 | | | 15 | 85.38% |
| 16a | 33-1/3% support test—2018. If the and stop here. The organization of | | | | ne 14 is 33-1/3% i | or more, check this | s box ► X |
| b | b 33-1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | | | | | |
| 17a | 10%-facts-and-circumstances tes or more, and if the organization the organization meets the 'facts- | neets the 'facts-ar | nd-circumstances' | test, check this bi | ox and stop here. | Explain in Part VI | |
| | 10%-facts-and-circumstances tes or more, and if the organization r organization meets the 'facts-and | neets the 'facts-an I-circumstances' te | nd-circumstances' est. The organizati | test, check this be on qualifies as a p | ox and stop here. oublicly supported | Explain in Part VI I organization ' | how the |
| 18 | Private foundation. If the organiz | ation did not check | k a box on line 13, | 16a, 16b, 17a, o | r 17b, check this b | oox and see instruc | tions |
| 2 4 4 | | | | | C ala | dula A /Form 990 | ov 000 EZ\ 2019 |

Schedule A (Form 990 or 990-EZ) 2018

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization

| _ | fails to qualify under the te | sts listed below, p | olease complete F | Part II.) | | | |
|------------|--|---------------------|--|----------------------|---------------------|-------------------|-----------|
| | tion A. Public Support | | · · · · · · · · · · · · · · · · · · · | | | | |
| Calen 1 | dar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants') | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
| 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 | | | | | | |
| | Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| С | Add lines 7a and 7b | | | | \ | | |
| 8 | Public support. (Subtract line 7c from line 6) | | | | | | |
| | tion B. Total Support | | | | | | r |
| | dar year (or fiscal year beginning in) ► | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
| - | Amounts from line 6 | | | | _ | | |
| IVa | Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | | | | | |
| | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| _ | Add lines 10a and 10b 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) | | | | | | |
| | Total support. (Add lines 9, 10c, 11, and 12) | | | | | | |
| | First five years. If the Form 990 is organization, check this box and | stop here | · | d, third, fourth, or | fifth tax year as a | section 501(c)(3) | ▶ □ |
| | tion C. Computation of Pu | | . | 12 1 (0) | | 1.5 | |
| 15 | Public support percentage for 20 | | | ie 13, column (f)) | | 15 | % |
| | Public support percentage from 2 | · | | | | 16 | |
| | tion D. Computation of Inv | | | | (0) | 1 4-5 | |
| 17 | Investment income percentage for | • | | - | nn (ĭ)) | 17 | % |
| 18 | Investment income percentage fr | | | | . 15 | 18 | |
| | 33-1/3% support tests—2018. If the solution of the solution is not more than 33-1/3%, check | this box and stop | here. The organi | zation qualifies as | a publicly suppor | ted organization | ▶ [_} |
| | 33-1/3% support tests—2017. If the line 18 is not more than 33-1/3%, | check this box a | nd stop here. The | organization qual | ifies as a publicly | supported organi | zation |
| 20 | Private foundation. If the organiz | ation did not ched | ck a box on line 14 | 4, 19a, or 19b, che | eck this dox and s | ee 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

| Sec | tion A. All Supporting Organizations | | T | |
|------|--|-----|-----|----|
| | | | Yes | No |
| 1 | Are all of the organization's supported organizations listed by name in the organization's governing 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 | 1 | | |
| 2 | Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2) | 2 | | |
| 3a | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below | 3a | | |
| t | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination | 3b | | |
| c | 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 | 3c | | |
| 4a | Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below | 4a | | |
| t | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations | 4b | | |
| c | 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 | 4c | | |
| 5a | 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) | 5a | | |
| b | 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? | 5b | | |
| c | Substitutions only. Was the substitution the result of an event beyond the organization's control? | 5с | | |
| 6 | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI. | 6 | | |
| 7 | 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) | 7 | | |
| 8 | 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) | 8 | | |
| 9a | Was the organization controlled directly or indirectly at any time during the tax year by one or more 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 | 9a | | |
| b | 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 | 9b | | |
| С | 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 | 9с | | |
| 10 a | Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below | 10a | | |
| b | Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings) | 10b | | |

| ra | it iv 1 Supporting Organizations (Continued) | | | |
|-----|--|---------|------|----|
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | ····· | Yes | No |
| | a 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 | | |
| | b A family member of a person described in (a) above? | 11b | | |
| | c 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 | | |
| Sec | ction B. Type I Supporting Organizations | | | |
| _ | Delite device have a large series of the series and the series are | | 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 | | |
| 2 | Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization | 2 | | |
| Sec | ction C. Type II Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s) | 1 | | |
| Sec | ction D. All Type III Supporting Organizations | | | , |
| | | | Yes | No |
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? | 1 | | |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s) | 2 | | |
| 3 | By reason of the relationship described in (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 supported organizations played in this regard | 3 | | |
| Sec | ction E. Type III Functionally Integrated Supporting Organizations | | | |
| 1 | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction | ons). | | |
| | The organization satisfied the Activities Test. Complete line 2 below | • | | |
| | b The organization is the parent of each of its supported organizations. Complete line 3 below | | | |
| | c The organization supported a governmental entity Describe in Part VI how you supported a government entity (see ins | tructio | ons) | |
| | | | | |
| 2 | Activities Test Answer (a) and (b) below. | , | Yes | No |
| , | a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities | 2a | | |
| 1 | b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement | 2b | | |
| 3 | Parent of Supported Organizations Answer (a) and (b) below. | | | |
| • | a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i> | За | | |
| | b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard | 3b | | |

| Pa | rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Organiz | zations | | ı |
|-------|--|--------------------|---|----------------------------------|
| 1 | Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization | t on Nov s must | r. 20, 1970 (explain in F complete Sections A th | Part VI). See prough E |
| Sec | tion 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 | | |
| Sec | tion B — Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) | | | |
| - 6 | Average monthly value of securities | 1a | | |
| t | Average monthly cash balances | 1b | | |
| | 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 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 | | |
| 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 | | |
| Sec | tion 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 (see instructions). | grated T | ype III supporting orga | anization |
| BAA | | | Schedule A (Fo | orm 990 or 990-EZ) 2018 |

| 1 44 | (t 4 Type in Non Tunedonally Integrated 303(a)(3) Sup | porting Organization | 13 (continuca) | |
|------|---|--------------------------------|--|---|
| Sec | tion D — Distributions | | | Current Year |
| 1 | Amounts paid to supported organizations to accomplish exempt pur | rposes | | |
| 2 | Amounts paid to perform activity that directly furthers exempt purpoun excess of income from activity | oses of supported organ | izations, | |
| 3 | Administrative expenses paid to accomplish exempt purposes of su | ipported 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 organ in Part VI) See instructions | nization is responsive (p | rovide details | |
| 9 | Distributable amount for 2018 from Section C, line 6 | + | | |
| 10 | Line 8 amount divided by line 9 amount | · · · | | |
| Sec | tion E — Distribution Allocations (see instructions) | (i) Excess Distributions | (II) Underdistributions Pre-2018 | (iii) Distributable Amount for 2018 |
| _1 | Distributable amount for 2018 from Section C, line 6 | | | |
| 2 | Underdistributions, if any, for years prior to 2018 (reasonable cause required – explain in Part VI) See instructions | | | • |
| 3 | Excess distributions carryover, if any, to 2018 | | | |
| | From 2013 | | | |
| t | From 2014 | | | |
| | From 2015 | | | |
| | From 2016 | | | |
| | From 2017 | | | |
| | f Total of lines 3a through e | | | |
| ç | Applied to underdistributions of prior years | | | |
| ۲ | Applied to 2018 distributable amount | | | |
| | Carryover from 2013 not applied (see instructions) | | | |
| | Remainder Subtract lines 3g, 3h, and 3i from 3f | | | |
| 4 | Distributions for 2018 from Section D, line 7 \$ | | | |
| a | Applied to underdistributions of prior years | | | |
| t | Applied to 2018 distributable amount | | | |
| - | Remainder Subtract lines 4a and 4b from 4 | | | |
| | Remaining underdistributions for years prior to 2018, 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 2018 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions | | | |
| 7 | Excess distributions carryover to 2019. Add lines 3j and 4c | | | |
| 8 | Breakdown of line 7 | | | |
| а | Excess from 2014 | <u> </u> | | |
| | Excess from 2015 | | | |
| C | Excess from 2016 | <u> </u> | | |
| c | Excess from 2017 | <u> </u> | | ······································ |
| | Evcess from 2018 | <u> </u> | | |

BAA

Schedule A (Form 990 or 990-EZ) 2018

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

SCHEDULE 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 Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Clash

Global Banjara Baptist Ministries International, Inc.

Employer identification number 26-2493387

Part III, line 28 (continued) The Aletheia Banjara School (ABS):

I. School Project - Aletheia Banjara School

Vision Statement

To develop passionate leaders who are adequately equipped academically, socially, physically, and spiritually to influence the world for Christ.

Mission Statement

Aletheia Banjara School offers Christ-centered education in a nurturing atmosphere which enables its students to develop their talents to their fullest potential for service in all areas of God's Kingdom. We know that every individual student is a unique image bearer of God, and we don't let any of them fall through the cracks. Our students thrive here both in classroom and many extra-curricular activities.

Aletheia Banjara School (ABS) is a landmark in Gurrapu Thanda and was inaugurated in July 2009. Pastor K. Srinivas Naik was born in Gurrapu Thanda where there was no school. He had to go to a school far away from his house. Pastor Naik was a recipient of a Government Merit Scholarship, which enabled him to join a reputed Government Residential School in Hyderabad. He successfully completed 10th Grade. He desired to become an engineer after completing the Pre-University Course. During his study, Pastor Naik met with a Christian family who supported his studies and introduced him to church and ultimately lead him to accept Jesus Christ and become a Christian.

Pastor Naik did not forget his past and fellow-Banjara children who neither had proper education nor were aware of the truth that Jesus Christ is the savior. The Banjara were engrossed in weird superstitions and animistic beliefs. They were illiterate, nomadic tribes, very backward and economically weak. He realized that it

Pastor Srinivas Naik's association with Global Banjara Baptist Ministries (GBBM) helped him draw their attention to this remote village. GBBM felt that education would be a powerful tool for the economic and social uplift of the community, and more importantly it would enable them to reason and to understand the Gospel. With a clear vision from God, and unflinching faith in Him, GBBM laid the foundation stone for its first school on 4 Dec 2005 at Gurrapu Thanda.

ABS has successfully completed eight academic years and is in the middle of its ninth year. The School has introduced many unique features for its students, which no other school in the district has. These are apart from the regular activities that a school should have. Let us briefly discuss some of these features.

ABS Students' performance in 10th Grade Examinations

The first batch of nine 10th grade students appeared for Government Examination in March 2017 and their performance was excellent. All of the students scored highest marks among the students from 15 schools in three counties. The government officials have specifically called the Principal of ABS and felicitated him and acknowledged the performance of the students.

The school continued in 2018 to encourage education for girls; emphasizing English; taking high school students on educational tours; conducting science fairs; conducting competitions in literary activities; teaching students how to maintain health and hygiene; providing safe drinking water, providing a power-packed drink at 10:00 AM & nutritious mid-day meal for lunch; mentoring through Character Building Classes; promoting eco-friendly environment by planting thousands of trees in the locality; observed Indian Republic Day, Independence Day, Teachers Day, Children's Day, Christmas Day and many other special days.

Praise God for plentiful water

Rainfall in this drought-prone region is insufficient and the last five years have been dry. Two bore-wells in the School have dried up. Another bore-well was

yielding very little water, which was insufficient and we even had to close the School for a short duration due to water scarcity.

We thank the Lord for a generous donor from Fellowship Bible Church, Waco, TX, who donated sufficient funds for digging another well, which yielded plenty of water to meet all needs of the School.

Boarding facilities

At present, we have 100 boarders in the School. They are being accommodated in classrooms and sleeping on the floors.

During the last two academic years nearly 300 students left the School due to lack of boarding facilities. It was a sad moment for both students and the parents to leave the School. Due to continuous drought in the region, parents of the students were constrained to put their children in boarding schools in order to migrate to other places in search of livelihood.

To arrest this trend, ABS would like to provide boarding facilities to at least 200 students.

ABS is looking for donors to provide ninety 2-tier cots (beds) and 200 mattresses.

Construction of Teachers' Quarters

An amount of \$20,000 was granted against the Water Melon Project for construction of Teachers' Quarters at ABS in 2016.

We have laid the roof for the first floor for four sleeping quarters.

We still need \$30,000 to complete the construction of the first floor.

We needed to finish construction of the floor by March 2018 to attract new teachers to join ABS.

Part III, line 28 (continued):

II. Health

Medical & Awareness Camps were conducted in several regions where GBBM is active

in ministry. HIV/AIDS awareness campaigns helped many victims to get treatment and counseling. Sixty-eight (68) individuals are receiving regular medicines for HIV/AIDS, four HIV positive children were admitted in a special boarding school meant only for such candidates.

III. Farmers Training

Mr. C. V. Abraham, one of the Board Members of GBBM India, has been a great blessing to the small and uneducated farmers.

IV. Church Planting:

As in the past few years, the Global Banjara Baptist Ministries' (GBBM) efforts to win souls from the Banjara Community is becoming more and more challenging. The present government is craftily enacting laws to decimate Christianity. To appease the majority religious communities towards polarization for political gains, the authorities in power are supporting fanatic groups. The Indian populace is so polarized now that it is becoming very difficult to publicly preach the Gospel.

The uncertain and hostile environment is making it very difficult for GBBM to achieve its goals. The pastors and evangelists, having tasted the joy and the benefits of salvation, are continuously witnessing to the Banjara and others. The events in various parts of the country are very disturbing. Even the media is gagged and the news of attacks on Christians have literally disappeared from the TV, newspapers, and e-media, etc. The present situation is very disheartening and creating terror and immense fear among the pastors and evangelists and dissuading them not to venture into areas where the Gospel is yet to spread. The incidents of brutal and continuous attacks on Christians in many parts of India, especially Odisha, and forcefully reconverting the hitherto converted Christians to Hinduism is deterring those who are willing to accept Jesus as their personal savior. They are afraid that someday even they will have to face such hostile situations. We commend the GBBM evangelists and Church planters who bravely are upholding Jesus Christ and

spreading the Gospel to the unreached in spite of untoward situations. The results may not be great, but hard work and efforts against the vehement opposition is noteworthy.

GBBM's work is based upon four principles: Reaching (sowing the seed); Discipling (help to follow Christ); Leading (equipping/training); and Transforming (encouraging to reach others).

Reaching: GBBM works amongst Banjara Community in four states of India:

Telangana, Andhra Pradesh, Karnataka and Madhya Pradesh. The Banjara people are very conservative and inhabit remote villages called thandas. They give a lot of prominence to their religion, religious customs and culture, and perform their religious festivals fervently and with zeal. GBBM pastors and believers and their families too inhabit these thandas and frequently face threats and attacks.

The Government is extending sops, such as free education, government jobs, and hostel/boarding facilities to students, etc., to Schedule Tribes, which includes the Banjara Community, as well. In a few, states if anyone becomes a Christian, he/she tends to lose these benefits.

These are the major hurdles that the GBBM is experiencing in all Banjara villages. It should be taken into consideration that our pastors work under these adverse conditions where it is not easy to convince a non-believer to accept Gospel. But these circumstances do not deter our pastors to shirk their responsibilities of spreading the Word.

GBBM work is spread in 195 villages. 31,478 persons heard the Gospel and 866 have accepted Christ as their personal Savior. This we consider a major achievement under the present political situation and concerted efforts of the anti-Christian elements who time and time disturb and discourage the Banjaras from knowing the truth.

Discipleship: Banjara are very sensitive and religious people. Religion had always been a bone of contention and they never allowed anyone to interfere and

influence them with regard to religion and religious practices. Open preaching of the Gospel is met with opposition and attracted physical attacks. A better way of communicating with them is the 'man-to-man' approach. Even this approach is met with suspicion and resistance, but to some extent is successful. Some of the believers who accepted Jesus Christ are baptized and trained to become disciples. When the Banjara believers come to know the truth they become very staunch Christians and strive to share their salvation experience with others. These disciples leave everything that they possess and take up the cross. GBBM has many such disciples who reach out to the Banjara Community and win souls. One hundred and forty four (144) believers have been baptized.

Leading: The literacy rate among the Banjara is very low. Many of our believers cannot read or write. Those believers who are literate are picked up and trained to share the Gospel and help in worship services. GBBM recruited Harvest Church of Memphis, Tennessee and Kingdom's Harvest International (KHI) to help train the pastors, evangelists and church planters. A brief report is given under the heading "On-going Training for Pastors and Leaders".

Transforming: GBBM has a wonderful plan of shaping a believer into a 'fisherman'. The three steps (reaching, discipleship and leading) leads to transforming. It is a painstaking effort to change a believer into a 'fisherman', i.e., a fisher of men.

GBBM has been very successful in this aspect and there are many dedicated and sincere servants of God who involve a believer and help him/her take steps to reach this level.

V. On-going Training for Rural Leaders

GBBM is striving to equip the pastors, evangelists, Church planters and leaders of numerous village churches with various levels of training and imparting practical knowledge to them. Harvest Church of Memphis is sending three teams a year to help in this area. Kingdom's Harvest International (KHI) and few other individuals also

Name of the organization Global Banjara Baptist Ministries Employer identification number 26-2493387 International, Inc.

are helping GBBM in the training.

Form 990-EZ, Part I, Line 10 Grants and Similar Amounts Paid In Excess of \$5,000

Class of Activity:

Grant

Donee's Name: Donee's Address: Global Banjara Baptist Ministries 2-2-185/90/3/9; 104 VPP Muthu Bldg Amberpet, Hyderabad Andhra Pradesh

None

Relationship of Donee:

Cash Amount Given:

\$ 138,558.

Form 990-EZ, Part I, Line 16 Other Expenses

| Advertising and Promotion |
|---------------------------|
| Equipment |
| Information Technology |
| Meals / Banquet |
| Office Expenses |
| Travel |

| | \$ 100. |
|-------|---------------|
| | 1,512. |
| | 4,467. |
| | 942. |
| | 2,865. |
| | 906. |
| Total | \$ 10,792. |

Form 990-EZ, Part III - Organization's Primary Exempt Purpose

To support the community service, agricultural and humanitarian aid projects of Global Banjara Baptist Ministries in India, through organization, training and fund raising in the United States of America.

Form 990-EZ, Part V - Regarding Transfers Associated with Personal Benefit Contracts

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

No

(b) Did the organization, during the year, pay premiums, directly or

indirectly, on a personal benefit contract?

No