# Form **990**

## **Return of Organization Exempt From Income Tax**

OMB No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public.

2018

Open to Public

Inter	nal Revenue	Service	► Go to www.irs.g	ov/Form990 for instruction	ns and th	ne latest	info	rmation.		Inspection		
A For the 2018 calendar year, or tax year beginning , 2018, and ending , 20								, 20				
В	Check if ap	plicable.	C Name of organization_Redeemer	Dubai					D Employer identification number			
$\bar{\Box}$	Address ch	•	Doing business as							27-1975559		
一	Name char	Doom!							E Telephor	ne number		
Ħ	Initial return	•	12115 Hinson Rd		·					501-975-5050		
$\exists$	Final return/		City or town, state or province, cour	ntry, and ZIP or foreign postal co	ode	I						
H	Amended r	1	Little Rock, AR 72212	,,				1	<b>G</b> Gross re	celpts \$ 1,396,569		
Ħ	Application		F Name and address of principal offic	er				Hial is this a on		subordinates? Yes Vo		
_	Аррисации		Mike Boschetti - address same as			,	- 1			s included? Yes No		
_	Tax-exemp		✓ 501(c)(3)		(a)(1) or	$\Box \mathcal{M}'$	<b>'</b>			list (see instructions)		
<u>'</u>	Website:		<u> </u>	) 1 (INSERT NO) (11 4047	(4)(1) 01	<del>- 1)</del>	#	H(c) Group	exemption	number >		
<del>ь</del> К			Corporation Trust Associa	ation Other >	L Yea	r of forma		2010		of legal domicile: AR		
_	art I	Summ			1				1			
			scribe the organization's miss	sion or most significant ag	tivities:	Redee	mer	Dubai pro	vides fina	ncial support		
•	l l	-	mer Church Dubai, a Christian Ch	<del>-</del>								
Activities & Governance	.:											
Ĕ	2 0	back thi	is box ▶☐ if the organization	discontinued its operation	ns or di	ennsed	of m	ore than	25% of	ite net assets		
Š			of voting members of the gove			эрооса	<b>•</b>	ioro iriari	3	no not accord.		
G.			of independent voting member			line 1h	٠.		4			
es			nber of individuals employed i						5			
Ę	l l		nber of volunteers (estimate if			- Luj			6			
<u> </u>	1		elated business revenue from			• •	• •		7a			
•			ated business taxable income				• •		7b			
	D   1	ot union	ated business taxable income	7 110111 1 01111 330-1, 11110 00	<u>,</u>	• •	<u> </u>	Prior Ye		Current Year		
	8 0	Contributions and grants (Part VIII, line 1h)								1,396,569		
ä			service revenue (Part VIII, line	•	,424,948	1,000,000						
Revenue		_	•	<del>-</del> -								
æ	1		nt income (Part VIII, column (A									
			enue (Part VIII, column (A), lin enue—add lines 8 through 11 (i			ΞĐ.	$\dashv$	4	,424,948	1,396,569		
						10 12)	25	· ·	726,952	542,977		
	13 G	iranis ar	nd similar amounts paid (Part I	X, column (A), lines 1-3)			ö		720,952	342,377		
	14 B	enems p	s paid to or for members (Part IX, column (A) Pine 4) 11 2 6 2019.  other compensation, employee benefits (Part R) column (A), lines 5–10.							902,332		
Ses			nal fundraising fees (Part IX, o		563,702	902,332						
Expenses			draising expenses (Part IX, co		JENI	ÜΤ		<b>\</b>		1		
X					<u> </u>			3	68,366	6,482		
			oenses (Part IX, column (A), lir enses. Add lines 13–17 (must		 . lino 25	· ·			,359,020	1,451,791		
		•	less expenses. Subtract line 1	• • • • • • • • • • • • • • • • • • • •	, 11116 23	" '		•	65,928	-55,222		
		evenue	less expenses. Subtract line	io irom line 12	· · ·	• •	Beal	nning of Cu		End of Year		
sets or	20 T	otal aco	ets (Part X, line 16)			ŀ			,048,932	993,710		
Saga Saga	21 T		ilities (Part X, line 26)						,040,302	330,710		
Net Ass Fund Ba	22 N		s or fund balances. Subtract	ine 21 from line 20				1	,048,932	993,710		
_			ure Block		<u> </u>	• • ]		•	1040,552	333,710		
			y, I declare that I have examined this	ratum uncluding decompanyung	echodulos	and state	omen	te and to th	ne best of n	ny knowledge, and helief it is		
			ete Declaration of preparer (other than							ny katowicego izata bester, it is		
		20	Jahner 11/15	TIPLA PITA					7.	12-19		
Sig	ın 📙	Signa	ature of officer		<del></del>			l Dat	<del>e / = /</del>	<u> </u>		
He		<b>7</b>	Michael M 100	CALPILL IN	1191	1/0		)				
Type or print name and title												
_		<u>,                                      </u>	pe preparer's name	Preparer's signature		TD	ate		Ta	PTIN		
Pa			• • • • • • • •	]		ً ا	-		Check L	#		
	eparer	Euro!		<u> </u>	<del></del>			F1	<u> </u>			
Us	e Only	Firm's na							's EIN ►			
Ma	v the IRS		ddress >s this return with the preparer	shown above? (see instri	ictions)			_ Pno:	ne no	Yes No		
For	Popopus		etion Act Notice see the senar			Cat	· ·	12027	• • •	Form <b>QQA</b> (2018)		

Part	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Redeemer Dubai's mission is to help establish and support influential evangelical Christian churches located throughout the middle east.  Redeemer Church of Dubai was established in 2010, Immanuel Church of Fujairah, UAE was started by the Dubai church in 2015,
	Redeemer Church of Al Ain and Gulf Training Center were started in 2016
	Neuceiner Order of Art Annual Country and
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
	(O. d
4a	(Code: ) (Expenses \$ 1,075,926, including grants of \$ 199,904) (Revenue \$ )  Redeemer Dubai funds the Dubai church by funding expenses (room rent, subcontractors, conferences, payroll etc.) and by providing
	ample directly to the Divisi objects which they use for normal Church operations
	<u> </u>
	•
4b	(Code: ) (Expenses \$ 99,850 including grants of \$ 72,050 ) (Revenue \$ )
	Redeemer Church Dubal is committed to planting influential churches throughout the world. Part of that commitment is seen by its support of Immanuel Church of Fujairah. These grants were to that church.
4c	(Code: ) (Expenses \$ 217,510 including grants of \$ 182,398 ) (Revenue \$ )
	Support for Redeemer Church of Al Ain. These grants were to help fund that church
	······
	•
4d	Other program services (Describe in Schedule O.)
4	(Expenses \$ 1,393,286 including grants of \$ 454,352 ) (Revenue \$ )  Total program service expenses \$ 1,393,286

Form 990 (2018)

Page 2



Part 1	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	>	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	<b>&gt;</b>	
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		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		<b>√</b>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<b>√</b>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<b>✓</b>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			<u></u>
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		<b>✓</b>
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
c	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		<b>✓</b>
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		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
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		<b>✓</b>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
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		<b>~</b>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	1	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	<b>v</b>	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	1	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		<b>✓</b>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
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		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	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	21	1	
			000	

Part I	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 2? If "Yes," complete Schedule I, Parts I and III	22		<b>√</b>
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 employees? If "Yes," complete Schedule J	23	<b>√</b>	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	24a		<b>→</b>
<b>b</b>	through 24d and complete Schedule K. If "No," go to line 25a	24b		<b>-</b>
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			<u> </u>
С	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		<b>√</b>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		<b>&gt;</b>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		<b>&gt;</b>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<b>*</b>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<b>✓</b>
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		✓
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<b>√</b>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	ļ	✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		<b>✓</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<b>-</b>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
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
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<b>√</b>
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.	35b		<b>✓</b>
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
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		<b>√</b>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	1	
Part				_
	Check if Schedule O contains a response or note to any line in this Part V			
4-	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a   3		Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 3  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	-		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	<b>-</b>	
				(2018)

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
	The state of analysis are stated as Forms W.O. Transmitted of Work and Tay		Yes	No 1
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  Statements, filed for the calendar year ending with or within the year covered by this return.			ı
	Statements, filed for the calendar year ending with or within the year covered by this return  11 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	7	
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	~~	Ť	一
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		乛
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
_	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		<u> </u>
b	If "Yes," enter the name of the foreign country: ▶			- 1
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	<u> </u>		<u>.</u>
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u>√</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c		<del>-</del>
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	30		<u> </u>
6a	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
-	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			لب
	and services provided to the payor?	7a 7b		<b>✓</b>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	70		
С	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			ĺ
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		$\overline{\checkmark}$
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		<b>✓</b>
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	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	Ŭ		1
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			1
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b		1	
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders			1
a b				
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			- 1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which			
b	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<b>√</b>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in 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		<b>✓</b>
16	If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		<b>-</b>
.0	If "Yes," complete Form 4720, Schedule O.	.0		<del>-</del>
_	······································	For	990	(2018)

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See in							
	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>	•	. Ц				
Section	on A. Governing Body and Management							
	E to the control of the control of the control of the territory		Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 4	1						
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar							
	committee, explain in Schedule O.							
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 3			l .				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1						
_	any other officer, director, trustee, or key employee?	2		1				
3	Did the organization delegate control over management duties customarily performed by or under the direct	-						
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		✓				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<b>√</b>				
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		<b>✓</b>				
6	Did the organization have members or stockholders?	6		<b>✓</b>				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	_		١.				
	one or more members of the governing body?	7a		<b>-</b>				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			١,				
_	stockholders, or persons other than the governing body?	7b		<b>✓</b>				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			Ι.				
•	the year by the following: The governing body?	 8a	7					
a b	Each committee with authority to act on behalf of the governing body?	8b	7					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at		<u> </u>					
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		✓				
Section	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	ode.)	)				
			Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a		1				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	✓					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	✓					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	<b>✓</b>					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	١						
	describe in Schedule O how this was done	12c	<u> </u>	<del>                                     </del>				
13	Did the organization have a written whistleblower policy?	13		1				
14	Did the organization have a written document retention and destruction policy?	14		<b>-</b>				
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a	7					
b	Other officers or key employees of the organization	15b	$\overline{}$					
	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 similar arrangement							
	with a taxable entity during the year?	16a		1				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its							
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the							
04	organization's exempt status with respect to such arrangements?	16b		L				
_	on C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed Exempt from Arkansas filing	T (O-						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990- (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	(2ec	uon t	001(C)				
	Own website Another's website Upon request Other (explain in Schedule O)							
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	ماام	/ and				
	financial statements available to the public during the tax year.	.J. 001	,,,-)	,, 4,14				
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	<b>&gt;</b>					
	Lisa C/O Mike Boschetti 12115 Hinson Rd Little Rock, AR 72212 501-350-0511							

Page	7

•			
Part VII	Compensation of Officers, Direct	ors, Trustees, Key Employees	s, Highest Compensated Employees, and
	Independent Contractors		

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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization noi	r any related	d orga	aniz	atio	n c	ompe	nsa	ted any curren	t officer, directo	r, or trustee.
					C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and Title						than o		Reportable	Reportable	Estimated
Name and Title	Average hours per					ıs both or/trusi		compensation	compensation from	amount of
	week (list any			_			<u> </u>	from	related	other
	hours for	걸효	nst	Officer	ê	불호	릴	the	organizations	compensation
	related	red vid	ੋੜੋਂ	ള	er	Š	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	organizations below dotted	or all	) S		Key employee	88	l	(44-2/1099-WIGC)		organization and related
	line)	S	<b>3</b>		yee -	ᄛ	1	•		organizations
		Individual trustee or director	Institutional trustee			Highest compensated employee				į
			•			ĝ				
(1) Dave Furman	40									
12115 Hinson Rd Little Rock, AR 72212	<del> </del>	1		1					192,315	I
(2) Steve Snider	<1	•		Ť	-	<b></b> -			102,010	
105 Noyant Little Rock, AR 72223	·····	1								I
(3) Bill Wellons	<1	Ť				<u> </u>	-		,	
15112 Chambery Dr Little Rock, AR 72223	ļi	1								I
	<2	_				<u> </u>	$\vdash$			_
(4) Mike Boschetti 13101 Bart Moreland Dr Roland AR 72135		1		1						I
		•		Ť						
(5)										
(6)			_	_						
_(0)	}									
(7)										
(8)			_	_	$\vdash$	-				
(8)								1		İ
(9)							<u> </u>			
	·									
(10)							<u> </u>			- <u>-</u>
(10)										1
(11)				-						
N										
(12)								_		
<del></del>	[									
(13)										
<i>32</i>	<b> </b>				1					
(14)										
(17)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)														
(A) Name and title		(B)  Average hours per week (list any hours for	box, office	unles er and	Pos neck is pe	rson	than of is both or/trust	en tee)	(D)  Reportable compensation from the	(E)  Reportable compensation from related organizations	n from	(F) Estimated amount of other compensation		
		related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-N		fro orga and	m the nization related nizations	
(15)														
(16)													-	
(17)												<del></del>		
(18)								-						
(19)								_						
(20)														- · <del>-</del>
(21)														
								-						
										<u> </u>		-		
(25)					_									
1b	Sub-total							<b>&gt;</b>		_				
d	Total (add lines 1b and 1c)							<b></b>		19231	5			
2	Total number of individuals (including bur reportable compensation from the organ		d to th	ose	list	ted	above	e) w	ho received m	ore than \$1	00,00	0 of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete							emp	oloyee, or high	est compe	ensate	d 3	Yes	No ✓
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of re greater th	portal an \$	ble ( 150,	con	npe )? <i>[</i>	nsatio	s, "	complete Sch	edule J fo	r suc	е	<b>I</b>	
5	Did any person listed on line 1a receive of for services rendered to the organization											al <b>5</b>		<b>√</b>
Section	on B. Independent Contractors													
1	1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.													
	(A) Name and business add	Iress	.=						(B) Description of s	ervices		(C) Compen:		
								-						
2	Total number of independent contractor received more than \$100,000 of compens							) th	nose listed abo	ove) who				

Part	VIII				D - 43 (III		
		Check if Schedule O contains a res	oonse or note to	o any line in this  (A)  Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ıts	1a	Federated campaigns 1a					
irar oun	b	Membership dues 1b					
s, G	С	Fundraising events 1c					
Gift lar	d	Related organizations 1d					
ıs, i	е	Government grants (contributions) 1e					
tio er S	f	All other contributions, gifts, grants,					
혈		and similar amounts not included above 1f	1,396,569				
Contributions, Gifts, Grants and Other Similar Amounts	9	Noncash contributions included in lines 1a–1f: \$		4 000 500			
	h	Total. Add lines 1a-1f	Business Code	1,396,569			
Ĕ	0-		Business Code				
Seve	2a b				<del></del>		
Se F	C						
ervi	d						
E S	e		_				
Program Service Revenue	f	All other program service revenue.	-			-	
P	g	Total. Add lines 2a-2f	▶				
	3	Investment income (including divide					
		and other similar amounts)					
	4	Income from investment of tax-exempt be					
	5	Royalties					
	6a	Gross rents	(1) 1 01001121				
	b	Less: rental expenses					
	C	Rental income or (loss)					
	d	Net rental income or (loss)	🕨				-
	7a	Gross amount from sales of (i) Securities	(ii) Other	"			
		assets other than inventory					
	b	Less: cost or other basis					
		and sales expenses .					
	C	Gain or (loss)					
	ď	Net gain or (loss)	▶				
venue	8a	Gross income from fundraising events (not including \$	i				
Other Re		of contributions reported on line 1c). See Part IV, line 18 a					
£		Less: direct expenses b					
		Net income or (loss) from fundraising	events . ►				
	9a	Gross income from gaming activities.					
		See Part IV, line 19 a					
		Less: direct expenses <b>b</b>				<u>-</u> -	<u> </u>
		Net income or (loss) from gaming acti Gross sales of inventory, less	vities ▶				<u> </u>
	IVa	returns and allowances a					
	h	Less: cost of goods sold b					
		Net income or (loss) from sales of inve					
		Miscellaneous Revenue	Business Code		• • • • • • • • • • • • • • • • • • • •		
	11a						
	b						
	С						
	d	All other revenue					
	е	Total. Add lines 11a-11d					
	12	Total revenue. See instructions .	🟲 📗	1,396,569		L	

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must con				
	Check if Schedule O contains a respon	se or note to any lin	ne in this Part IX .		
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	88,625	88,625		·
2	Grants and other assistance to domestic individuals. See Part IV, line 22	30,020	00,020		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	454,352	454,352		
<b>4</b> <b>5</b>	Benefits paid to or for members	192,315	192,315		
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages	639,117	587,094	52,023	
9 10 11	Other employee benefits	70,900	70,900		
a b c d e	Management				
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 13 14 15 16	Advertising and promotion	3,857 1,810		3,857	1,810
18 19 20 21 22	Payments of travel or entertainment expenses for any federal, state, or local public officials  Conferences, conventions, and meetings Interest  Payments to affiliates  Depreciation, depletion, and amortization				
23 24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a b c	Fund raising expenses	815			815
d e 25 26	All other expenses  Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the organization reported in column (B) joint costs	1,451,791	1,393,286	55,880	2,625
	from a combined educational campaign and fundraising solicitation. Check here    if following SOP 98-2 (ASC 958-720)				

Pa	art X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this F	Part X	<del></del>	<u> </u>
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	1,048,932	1	993,710
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section	1	i	
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
ţ		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
٦	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D			
		Less: accumulated depreciation		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		13	
	13	Investments—program-related. See Part IV, line 11		14	
	14	Intangible assets		15	
	15 16	•	1,048,932	16	903,710
$\dashv$	17	Total assets. Add lines 1 through 15 (must equal line 34)	1,040,932	17	303,710
	18	Grants payable		18	
	19	Deferred revenue		19	•
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
y,	22	Loans and other payables to current and former officers, directors,			
Liabilities	_	trustees, key employees, highest compensated employees, and			
اچ		disqualified persons. Complete Part II of Schedule L	-	22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third	1		
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
$\Box$	26	Total liabilities. Add lines 17 through 25		26	
Ses		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ an complete lines 27 through 29, and lines 33 and 34.	ıd		
aŭ	27	Unrestricted net assets		27	
Bal	28	Temporarily restricted net assets		28	
힐	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.	d		
इ	30	Capital stock or trust principal, or current funds		30	
2Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
₹	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Ž	33	Total net assets or fund balances	1,048,932	33	993,710
	34	Total liabilities and net assets/fund balances	1,048,932	34	993,710 Form <b>990</b> (2018)
				_	Fo

ım 99	0 (2018)		Pa	ge <b>12</b>
Part	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)		1,396	6,569
2	Total expenses (must equal Part IX, column (A), line 25)		1,45	1,791
3	Revenue less expenses. Subtract line 2 from line 1		-59	5,222
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		1,048	8,932
5	Net unrealized gains (losses) on investments			
6	Donated services and use of facilities			
7	Investment expenses			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain in Schedule O)			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))		993	3,710
art	Financial Statements and Reporting  Check if Schedule O contains a response or note to any line in this Part XII	<del></del>	 Yes	□ No
1	Accounting method used to prepare the Form 990: ☑ Cash ☐ Accrual ☐ Other		$\neg$	$\neg$
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		<b>√</b>
	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		<del>-</del>
	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			
C	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?  If the organization changed either its oversight process or selection process during the tax year, explain in	2c		

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 in Schedule O and describe any steps taken to undergo such audits.

За

3b

Form **990** (2018)

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

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Name of the organization

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

Employer identification number

Rede	em	er Du						27-197	
Pai			Reason for Public Char						ns.
The 6 1 2 3 4		Ac As Ah An	ation is not a private foundathurch, convention of church chool described in section ospital or a cooperative hospital research organization of the cooperative hospital's name, city, and state the cooperative hospital name, city, and cit	nes, or association 170(b)(1)(A)(ii). (spital service orgon operated in contents.	on of churches descri (Attach Schedule E (F ganization described II onjunction with a hosp	bed in se orm 990 on section oital desc	ction 170 or 990-E2 170(b)(1 ribed in s	0(b)(1)(A)(i). Z).) )(A)(iii). iection 170(b)(1)(A)(	
5			organization operated for the ction 170(b)(1)(A)(iv). (Comp		college or university	owned o	r operate	d by a government	al unit described in
6 7		🛮 An	ederal, state, or local goven organization that normally scribed in <b>section 170(b)(1)</b>	receives a subst	tantial part of its sup	in <b>sectio</b> port from	<b>n 170(b)</b> a goveri	(1)(A)(v). nmental unit or from	n the general public
8			ommunity trust described in						
9		or i uni	agricultural research organi university or a non-land-gra versity:	nt college of agri	iculture (see instruction	ons). Ente	r the nam	ne, city, and state of	the college or
10		rec sup acc	organization that normally reports from activities related oport from gross investment outred by the organization a	to its exempt full t income and uni fter June 30, 197	nctions—subject to co related business taxal 75. See <b>section 509(</b> a	ertain exc ble incom <b>i)(2).</b> (Cor	eptions, le (less se nplete Pa	and (2) no more tha ection 511 tax) from art III.)	n 33¹/₃% of its
11			organization organized and						
12		of	organization organized and one or more publicly suppo eck the box in lines 12a thro	orted organization	ns described in secti	on 509(a	)(1) or se	ection 509(a)(2). Se	e section 509(a)(3).
а	ì		<b>Type I.</b> A supporting organithe supported organization supporting organization. Yes	(s) the power to ou must comple	regularly appoint or e ete Part IV, Sections	lect a ma	jority of t	he directors or trust	ees of the
b	•		<b>Type II.</b> A supporting organization(s). <b>You must</b>	the supporting o	rganization vested in	the same			
C	;		Type III functionally integ its supported organization(						ally integrated with,
d	I		Type III non-functionally ithat is not functionally integrequirement (see instruction	grated. The orga	nization generally mu	st satisfy	a distribi	ition requirement an	
e	)		Check this box if the organ functionally integrated, or 7	ization received Type III non-func	a written determination	on from the	ne IRS the organizat	at it is a Type I, Type ion.	e II, Type III
f		Ente	r the number of supported o	organizations .					
9	<u> </u>	Prov	ide the following information	n about the supp	1.	1			
	(ī	) Nam	e of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	rganization ir governing nent?	(v) Amount of monetary support (see Instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
(A)									
(B)									
(C)	_								
(D)								•	
(E)									

Total

Part	Support Schedule for Organiza						
	(Complete only if you checked the Part III. If the organization fails to						uny under
Secti	on A. Public Support	quality dride	T the tests his	tea below, pr	case comple	to r are iii.j	
	dar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and	(4, 23 ; ;	<u> </u>	(-,		,	
•	membership fees received. (Do not	į					
	include any "unusual grants.")	744,500	1,067,464	1,374,207	1,424,948	1,396,569	6,007,688
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	744,500	1,067,464	1,374,207	1,424,948	1,396,569	6,007,688
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)		:		:		
6	Public support. Subtract line 5 from line 4						1017/18
	on B. Total Support			L		· · · · · · · · · · · · · · · · · · ·	y COLLEGE
	dar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	744,500	1,067,464	1,374,207	1,424,948	1,396,569	6,007,688
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)				1		
11	Total support. Add lines 7 through 10						6,007,688
12	Gross receipts from related activities, etc.					12	
13	First five years. If the Form 990 is for the organization, check this box and stop her	re			or fifth tax ye	ear as a section	n 501(c)(3) ► □
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2018 (line 6					14	100 %
15 16a	Public support percentage from 2017 Sch 331/a% support test—2018. If the organi- box and stop here. The organization qual	zation did not	check the box	on line 13, an	d line 14 is 33		
b	331/3% support test—2017. If the organization	zation did not	check a box o	n line 13 or 16	a, and line 15	is 33¹/₃% or me	ore, check
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the "organization	ets the "facts- facts-and-circu	and-circumstaumstaumstances" te	ances" test, ch st. The organiz	eck this box a ation qualifies	nd <b>stop here.</b> as a publicly	Explain in supported
b	10%-facts-and-circumstances test – 20 15 is 10% or more, and if the organiza Explain in Part VI how the organization in supported organization	ition meets the	e "facts-and-c	ircumstances"	test, check t	his box and s	top here.

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

	/	•
Pa	ŒΒ	3

1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 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	(e) 2018 /	(f) Total
Section A. Public Support  Calendar year (or fiscal year beginning in) ► (a) 2014 (b) 2015 (c) 2016 (d) 2017  1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  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	(e) 2018	(f) Total
Calendar year (or fiscal year beginning in) ► (a) 2014 (b) 2015 (c) 2016 (d) 2017  1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  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	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 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		
received. (Do not include any "unusual grants.")  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		
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		
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		
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		
unrelated trade or business under section 513  4 Tax revenues levied for the organization's benefit and either paid to		
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	1	
6 Total. Add lines 1 through 5		
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		
c Add lines 7a and 7b		
8 Public support. (Subtract line 7c from		
Ine 6.)		
Section B. Total Support		
Calendar year (or fiscal year beginning in) ► (a) 2014 /(b) 2015 (c) 2016 (d) 2017	(e) 2018	(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		
c Add lines 10a and 10b /		
11 Net income from unrelated business		
activities not included in line 10b, whether	ŀ	
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.) /	<del></del>	<del></del>
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	as a section	501/c\(2\)
organization, check this box and stop here		
Section C. Computation of Rublic Support Percentage	<del></del>	· · · <u> </u>
	15	%
	16	<del></del>
Section D. Computation of Investment Income Percentage		
	17	%
y e · · · · · · · · · · · · · · · · · ·	18	<del></del>
19a 33¹s% support tests—2018. If the organization did not check the box on line 14, and line 15 is more		
17 is not more than 331/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supporte		
b 331/3% support/tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is	_	_
line 18 is not more than 331/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supp		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and	_	

#### 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.)

	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete F	ait v	<u>·/_</u>	
Secti	on A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> 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 <b>Part VI</b> 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.	3a		
b	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 <b>Part VI</b> 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 <b>Part VI</b> 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		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> 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 <b>Part VI</b> 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 <b>Part VI</b> , 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		
с 6	Substitutions only. Was the substitution the result of an event beyond the organization's control?  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.	5c		
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 <b>Part VI</b> .	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 <b>Part VI</b> .	9b		
C	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.	9c		
10a	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

Part I	V Supporting Organizations (continued)					
			Yes	No		
11	Has the organization accepted a gift or contribution from any of the following persons?			1		
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				
	A family member of a person described in (a) above?	11b				
	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				
Section	on B. Type I Supporting Organizations					
			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 <b>Part VI</b> 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				
9	Did the organization operate for the benefit of any supported organization other than the supported	<b></b>		1		
2	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part</b>					
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			1		
	supervised, or controlled the supporting organization.	2				
Section	on 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_				
Section	on 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		اـــــا		
	· · · · · · · · · · · · · · · · · · ·					
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 <b>Part VI</b> 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	-				
J	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				
Section	on 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	nstru	ction	s).		
а	☐ 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 in				
2	Activities Test. Answer (a) and (b) below.		Yes	No		
а	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				
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 <b>Part VI</b> 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.		<b> </b>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or					
_	trustees of each of the supported organizations? Provide details in Part VI.	3a				
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				

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org			
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ	tru:	st on Nov. 20, 1970 (expl ions must complete Sect	ions A through E.
Section A-Adjusted Net Income		(A) Pnor 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) Prior 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 securities	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	<u></u>	
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		
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 pnor 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-functional instructions).	ly in	tegrated Type III support	ing organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3	) Supporting Organi	zations (continued)	
Secti	Current Year			
1_	Amounts paid to supported organizations to accomplish e		<del></del>	
2 	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	orted	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
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	h the organization is res	sponsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
_10	Line 8 amount divided by line 9 amount			
Secti	on 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 <b>Part VI</b> ). See instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014			
c	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2018 distributable amount			
<u>i</u>	Carryover from 2013 not applied (see instructions)			1
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from			İ
	Section D, line 7:			
<u>a</u>	Applied to underdistributions of prior years			]
<u>b</u>	Applied to 2018 distributable amount			
<u>c</u>	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.			
7	Excess distributions carryover to 2019. Add lines 3; and 4c.			
8	Breakdown of line 7:			
a	Excess from 2014			
<u>b</u>	Excess from 2015			
<u>c</u>				<u></u>
<u>d</u> _	Excess from 2017			<u> </u>
<u>e</u>	Excess from 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 F** (Form 990)

## **Statement of Activities Outside the United States**

OMB No 1545-0047

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990.

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

Employer identification number 27-1975559

Redee	mer Dubai					27	7-1975559	
Pari	General Information Form 990, Part IV, line		ies Outside	the United States. Com	plete if the orga	nization a	nswered "\	es" on
1	For grantmakers. Does the other assistance, the grante award the grants or assistan	es' eligibility	for the gran	ts or assistance, and the s	selection criteria	used to	✓ Yes	□ No
2	For grantmakers. Describe outside the United States.	in Part V the	e organization	's procedures for monitorin	g the use of its	grants and	d other ass	istance
3	Activities per Region. (The fo	llowing Part	I, line 3 table o	can be duplicated if addition	nal space is need	ed.)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) if activity liste a program se describe specific service(s) in the	rvice, c type of	(f) Tot expenditu and invest in the re	res for ments
(1)	<del></del>							
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)			<u>.</u>					
(13)								
(14)								
(15)		<u> </u>						
(16)								
(17)								-
3a	Subtotal							
b	Total from continuation sheets to Part I							
C	Totals (add lines 3a and 3b)							

_	•

Schedu	le F (Form 990) 201								Page 2		
Part	Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000 Part II can be duplicated if additional space is needed.										
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)		
<u> </u>			Middle East	Church support	72,050	Wire transfers					
_			Middle East	Church support	182,398	Wire transfers					
<u> </u>			Middle East	Church support	199,904	Wire transfers			=# :		
<u> </u>					ļ						
<u> </u>		ļ							·		
<u> </u>	<del></del>					_	<u></u>				
							ļ				
<u></u>		ļ .									
<u></u>											
<u> </u>											
									_		
<u></u>											
3	by the IRS, or	for which the		sted above that are red I has provided a section tittles		ency letter		· •	3		

	<u> </u>	
		Schodulo E (Form 990) 2019

Page 3

Schedule F (Form 990) 2018

(18)

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (e) Manner of cash disbursement (f) Amount of noncash assistance (g) Description of noncash assistance (h) Method of valuation (book, FMV, appraisal, other) (c) Number of recipients (d) Amount of cash grant (b) Region (a) Type of grant or assistance (1) (2) (3) (4) (5) (6) \_(7) <u>(8)</u> (9) (10) (11) (12) (13) (14) (15) (16) (17)

Schedule F (Form 990) 2018

Page	4

Part	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	☐ Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☐ Yes	✓ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	☐ Yes	✓ No

Schedule F (F	Form 990) 2018 Page
Part V	Supplemental Information
	Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
The \$72,05	0 grant is to Redeemer Church Dubai's 2014 church plant in UAE - Immanuel Church of Fujairah - Financial oversight and
accountabil	ity is a natural ongoing activity due to common leadership. Its website is www.immanuelfjuairah.com
The \$182,3	98 consists of grants and payments for the meeting space for the benefit of Redeemer Church Dubai's church plant in UAE
Redeemer	Church of Al Ain - Financial oversight and accountability is a natural ongoing activity due to common leadership. its website is:
www.redee	meralain.com
The \$199,9	04 consists of grants and direct expense such as facility rent for the benefit of Redeemer Church Dubai located in Dubai, UAE.
It is a Chris	tian church with common board members so financial oversight and accountability is a natural ongoing activity. Its website is:
www.redee	merdubai.com
·	

#### SCHEDULE I (Form 990)

# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization enswered "Yes" on Form 990, Part IV, line 21 or 22.

2018 Open to Public Inspection

OMB No 1545-0047

Department of the Treasury

► Attach to Form 990.

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

Name of the organization							Employer Identification number
Redeemer Dubai							27-1975559
Part   General Information	on Grants and	Assistance					
<ol> <li>Does the organization mainta the selection criteria used to a</li> <li>Describe in Part IV the organi</li> </ol>	in records to sub award the grants zation's procedu	stantiate the amore or assistance? res for monitoring	the use of grant fu	nds in the United	States	•	. ☑Yes □No 
Part II Grants and Other As Part IV, line 21, for any	sistance to Do y recipient that	mestic Organia received more t	zations and Dom han \$5,000. Part	estic Governm Il can be duplica	ated if additional	f the organization space is needed	n answered "Yes" on Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description noncash assista	
(1) AMEA Ministry 307 Leonora Dr Memphis TN 38117	81-4961409	501c3	56,925				Church planting support
(2) Proneers 1023 William Carey Dr Orlando FL 3283	52-1206938	501 <u>c3</u>	31,700				Church planting support
(3)							
(4)							
(5)				••••			
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
2 Enter total number of section	501(c)(3) and gov	vernment organiza	ations listed in the I	ine 1 table .			> 2
3 Enter total number of other or							•

Grants and Other Assistance t Part III can be duplicated if addition	o Domestic Individua	Is. Complete if the	e organization answ	vered "Yes" on Form 990,	Part IV, line 22.
(e) Type of grant or assistance	(b) Number of reciplents	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistan
					_
Supplemental Information. Pro	VIOS UIS HIIOMIZUOMIE	squired in Part I, I	ino 2, i art iii, colum	in (b), and any other addition	SHE IIIOMERON
		·	••••••		

Schedule I (Form 990) (2018)

#### **SCHEDULE J** (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

Name of the organization Redeemer Dubai

Employer identification number 27-1975559

Part	Questions Regarding Compensation			V T	A1 -
1a	Check the appropriate box(es) if the organization provided any of 990, Part VII, Section A, line 1a. Complete Part III to provide any reli	the following to or for a person listed on Form evant information regarding these items.	+	Yes	No
	☐ First-class or charter travel ☑ Housing	allowance or residence for personal use			
		s for business use of personal residence			
	<del>_</del>	social club dues or initiation fees			
		services (such as maid, chauffeur, chef)			
		Solvinos (Sasirias III.a.s.) Silasirios (Sasirios)			
b	If any of the boxes on line 1a are checked, did the organization reimbursement or provision of all of the expenses described.	on follow a written policy regarding payment heed above? If "No," complete Part III to			
	explain		1b	<b>✓</b>	
2	Did the organization require substantiation prior to reimbur directors, trustees, and officers, including the CEO/Executive [1a?	Director, regarding the items checked on line	2	<b>√</b>	
3	Indicate which, if any, of the following the filing organization use organization's CEO/Executive Director. Check all that apply. Do related organization to establish compensation of the CEO/Executive Director.	not check any boxes for methods used by a			
	☐ Compensation committee ☐ Written e	mployment contract			
	☐ Independent compensation consultant ☐ Compens	sation survey or study			
	☐ Form 990 of other organizations ☐ Approval	by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Seconganization or a related organization:	etion A, line 1a, with respect to the filing			
а	Receive a severance payment or change-of-control payment?		4a		✓
b	Participate in, or receive payment from, a supplemental nonqual	ified retirement plan?	4b		✓
С			4c		<b>✓</b>
	If "Yes" to any of lines 4a-c, list the persons and provide the ap	olicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations	must complete lines 5–9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did compensation contingent on the revenues of:				
а	The organization?		5a		1
b			5b		1
	If "Yes" on line 5a or 5b, describe in Part III.				
6	For persons listed on Form 990, Part VII, Section A, line 1a, did compensation contingent on the net earnings of:	he organization pay or accrue any			
а	The organization?		6a		<b>✓</b>
b	Any related organization?		6b		<b>√</b>
	If "Yes" on line 6a or 6b, describe in Part III.				
7	For persons listed on Form 990, Part VII, Section A, line 1a payments not described on lines 5 and 6? If "Yes," describe in F	Part III	7		<b>✓</b>
8	Were any amounts reported on Form 990, Part VII, paid or account to the initial contract exception described in Regulations				
	in Part III		8		✓
		<u> -</u>			
9	If "Yes" on line 8, did the organization also follow the rebu Regulations section 53.4958-6(c)?		9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VII Note: The sum of columns (B)()—(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title (i) Base (ii) Bonus & Incentive (iii) Other other deferred benefits (B)(i)-(D) in column (8) as deferred as deferred	nsation	
Lead Pastor   (ii)	in column (B) reported as deferred on prior Form 990	
Lead Pastor   (i)		
2 (I) (I) (II) (III) (II		
3		
3 (I) (I) (II) (III) (II		
4 (i) (ii) (iii) (		
4 (i) (ii) (iii)  (iiii) (iiii) (iiii) (iiii) (iiii) (iiiii) (iiiiii) (iiiiiiii		
5 (i) (i) (ii) (ii) (iii)  (iiii) (iiii) (iiii) (iiiiii) (iiiiiiii		
5 (I) (I) (II) (II) (III)		
6 (i) (i) (ii) (iii) (iiii) (iiiiiiiiiii		
6 (1) (1) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4		
7 (0) (0) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1		
7 (I) (II) (III)  (III)		
8 (I) (I) (I) (II) (II) (II) (III)		
8 (I)		
9 (1)		
9 (1)		
10		
10 (1)		
11 (1)		
0		
12 (0)		
0		
13 (0)		
0		
14 (1)		
0		
15 (0)		
0		
16 (1)		

Schedule J (Form 990) 2018

chedule J	om 990) 2018	Page 3
Part III	Supplemental Information	-
rovide	e information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete ditional information.	his part
ine 3		
Redeeme	ubal Church which is partially support by Redeemer Dubal) and its board of elders determines the compensation for its pastors including Dave Furman, the Lead Pastor. The	
rocess in	ides a provision that any compensated employee does not participate in determining the compensation level.	
••••		
		,

Schedule J (Form 990) 2018

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.

2018
Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.

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

**Employer identification number** Name of the organization 27-1975559 Redeemer Dubai Part VI - Lines 12b, 12c and 19 Redeemer Dubai's bylaws require a person with a potential conflict of interest to report such potential to the board. No such report was made during the year. In addition, at year end, the Board of Directors review material financial transactions with the Lead Pastor to discuss any potential conflict of interest and the Board of Director Minutes records the results of such discussions. There were no such conflicts or apparent conflicts during the year. The financial statements, governing documents including the conflict of interest policy are available to the public upon request. Part VI - line 11 Form 990 was reviewed by a CPA and was compared with previously submitted 990s to determine consistency in reporting. This in addition to Board Members' review Part VII - Section A There is one key employee whose name isn't listed due to their role in countries where the Christian Gospel is not allowed to be proclaimed. The inclusion of his name in a public document could jeopardize not only his work but even his freedom. His compensation was \$104,045