			27100	, 0 5 1	79102
F	, 9 9	20	Return of Organization Exempt From Income Tax	X	OMB No 1545-0047
			Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private fou	ndations)	2019
	Januar	•	▶ Do not enter social security numbers on this form as it may be made public		Open to Public
		of the Treasury nue Service	► Go to www.irs.gov/Form990 for instructions and the latest information.		Inspection
A	For the	2019 calen	dar year, or tax year beginning , 2019, and ending		, 20
В	Check if	applicable	C Name of organization Redeemer Dubai	D Employ	er identification number
	Address	change	Doing business as		27-1975559
	Name ch	nange	Number and street (or P O. box if mail is not delivered to street address)	•	ne number
닏	Initial ret		12115 Hinson Rd		501-975-5050
片		ırn/terminated	City or town, state or province, country, and ZIP or foreign postal code Little Rock, AR 72212	G Gross re	eceipts \$ 1,394,403
님	Amende	a return ion pending			subordinates? Yes No
Ч	Applicat	ion pending			included? Yes No
ī	Tax-exe	mpt status			. (see instructions)
J	Website	: ▶	H(c) Group e	exemption n	umber ►
		organization 🗸	Corporation ☐ Trust ☐ Association ☐ Other ►	M State of	f legal domicile AR
P	art I	Summa			
_	1		cribe the organization's mission or most significant activities: Redeemer Dubai providence of the critical results of the crit	les financi	al support
nce		for Redeem	er Church Dubai, a Christian Church located in Dubai, UAE and its church planting activities		
Activities & Governance	_	Chook this	box ► ☐ if the organization discontinued its operations or disposed of more than	2504 of it	
Ŏ.	2		voting members of the governing body (Part VI, line 1a)	3	.5 Het a55et5.
ত অ	4		independent voting members of the governing body (Part VI, line 1b)	4	
ies	5		per of individuals employed in calendar year 2019 (Part V, line 2a)	5	
Ę	6		per of volunteers (estimate if necessary)	6	
Aci	7a		ated business revenue from Part VIII, column (C), line 12	7a	
	b	Net unrela	ted business taxable income from Form 990-T, line 39	7b	
_			Prior Yea	ir	Current Year
ā	8			396,569	1,394,403
Revenue	9		ervice revenue (Part VIII, line 2g)		·
Æ	10		t income (Part VIII, column (A), lines 3, 4, and 7d)		
	11		nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	206 560	1,394,403
_	12		, , , , , , , , , , , , , , , , , , , ,	396,569 542,977	237,481
	14		aid to or for members (Part IX, column (A), line 4)	542,377	237,401
un.	15			902.332	1,017,974
JSe	16a		al fundraising fees (Part IX, column (A), line 11e)		
Expenses	b		raising expenses (Part IX, column (D), line 25)		
û	17		enses (Part IX, column (A), lines 11a-11d, 11-24e) FCFIVED	6,482	76,561
	18		nses. Add lines 13–17 (must equal Part IX column (A), line 25)	451,791	1,332,016
	19	Revenue le		-55,222	62,387
Net Assets or Fund Balances			Beginning of Cur		End of Year
Sset	20		ts (Part X, line 16)	993,710	993,710
let A	21		ties (Part X, line 26) OGDEN, 'UT	000 740	4.050.000
~ 4	22	Net assets	or fund balances. Subtract line 21 from line 20	993,710	1,056,097

Part II Signature Block examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is payer (diber libar officer) is based on all importantion of which preparer has any knowledge Under penalties of perjury, I declare that I have true, correct, and comp Sign Date Here Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check [] if Paid self-employed **Preparer** Firm's name Firm's EIN ▶ **Use Only** Phone no Firm's address ▶ May the IRS discuss this return with the preparer shown above? (see instructions)]Yes □ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No. 11282Y

Form **990** (2019)





Statement of Programs Service Accomplishments Check Schedule O contains a response or note to any line in this Part III	Omi 33	0 (2013)	
1 Billetify describe the organization's mission: Redeemer Chuart bubble was established in 2010, Immanual Church of Flyagrah, IAS was started by the Dubar durch in 2015. Redeemer Church of Dubar was established in 2010, Immanual Church of Flyagrah, IAS was started by the Dubar durch in 2015. Redeemer Church of Al Ant and Gulf Traning Center were started in 2016, the Benut church was started in 2019. 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27. If "Yes." describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes." describe these changes on Schedule O. Did the organization's program services accomplishments for each of its three largest program services as measured by expenses. Section 501(cgl) and 501(cgl)	Part		. 🔽
Redeemer Church of Duba was established and support influential evangleized Christian churches located throughout the middle east Redeemer Church of Living as established and 2019. Redeemer Church of Al Am and Gulf Training Center were started in 2016, the Beinut church was started in 2019. Dub the organization undertake any significant program services during the year which were not listed on the prior Form 900 or 990-627? If "Yes," describe these new services on Schedule O.	4		
Redeemer Church of Dubau was established in 2010, Immanuel Church of Flugarah, IJAE was started by the Dubai church in 2015. Redeemer Church of Al An and Guil Training Center were started in 2016, the Berint church was started in 2019. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27.	ı		
Process Section of Al Am and Gulf Training Center were started in 2016, the Benut church was started in 2019 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27 Vest Secrible these new services on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Vest Secrible these changes on Schedule O. 4 Describle the organization program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(pl(3)) and 501(pl(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. 4 (Code:) (Expenses \$ 735,901 including grants of \$ 207,459) (Revenue \$) 4 Redeemer Duba funds the Duba church by funding expenses (from rent, subconfusctors, conferences, payroll stc.) and by providing grants directly to the Duba church which they use for normal Church operations 4 Redeemer Church Duba is committed to planting influential churches throughout the world. Part of that commitment is seen by its support of immanuel Church of Fujarrah This expense is for payroll for that church 4 Code:) (Expenses \$ 34,000 including grants of \$ 1,000 includ			
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(Expenses \$ 150,421 including grants of \$ 24,045) (Revenue \$)	4d	Other program services (Describe on Schedule O.)	
	-		
	4e		

Page 3

BAFJO

Part	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	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
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	-	V _
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? <i>If</i> "Yes," complete Schedule C, Part II	4		1
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		✓
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_		v _
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		1
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		y
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		4
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
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
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		√
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		1
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		✓
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		✓
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	>	
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		,
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		1
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
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	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

Part l	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		<u> </u>
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	√	
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	040		√
	through 24d and complete Schedule K. If "No," go to line 25a	24a		-
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		√ √
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		_
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit 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		✓
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these	07		
28	persons? If "Yes," complete Schedule L, Part III	27		
а	IV instructions, for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If		ļ.—.	
	"Yes," complete Schedule L, Part IV	28a		\
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		✓
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29_		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
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		1
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? <i>If "Yes," complete Schedule R, Part I</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	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		✓
36	Section 501(c)(3) organizations. 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		√
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	~	
Part				
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable]		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	V	

Part '	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a				
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 10			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓_
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		✓_
b	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		V
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
-	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	٠.		١.
_	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			<u></u>
	and services provided to the payor?	7a 7b		V
b	· · · · · · · · · · · · · · · · · · ·	70		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		/
a	If "Yes," indicate the number of Forms 8282 filed during the year	70		<u> </u>
đ e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			<u></u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		7
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
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:			
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			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
	, , ,	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
_	Enter the amount of reserves on hand	4.5		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		\
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	ا ـ ـ ا		,
	excess parachute payment(s) during the year?	15		✓
46	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		√
	If "Yes," complete Form 4720, Schedule O.			

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Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change	s on Schedule C	. See ii	nstruc	tions.
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>	<u></u>	٠.	. 🗸
Secti	on A. Governing Body and Management			Yes	No
4	Enter the number of voting members of the governing body at the end of the tax year	1a	4	103	140
1a	If there are material differences in voting rights among members of the governing body, or	- Ta	4		
	if the governing body delegated broad authority to an executive committee or similar				
	committee, explain on Schedule O.				
b	Enter the number of voting members included on 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 r	elationship with	7		
_	any other officer, director, trustee, or key employee?		2		V
3	Did the organization delegate control over management duties customarily performed by or	under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or of		3		/
4	Did the organization make any significant changes to its governing documents since the prior For		4		/
5	Did the organization become aware during the year of a significant diversion of the organization		5	ļ	V
6	Did the organization have members or stockholders?		6	-	1
7a	Did the organization have members, stockholders, or other persons who had the power to				,
	one or more members of the governing body?		7a	ļ —	-
b	Are any governance decisions of the organization reserved to (or subject to approval stockholders, or persons other than the governing body?		7b		1
8	Did the organization contemporaneously document the meetings held or written actions un				1
•	the year by the following:	dertaken dunng			
а	The governing body?		8a	7	
b	Each committee with authority to act on behalf of the governing body?		8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot	ot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule of		9_		✓
<u>Secti</u>	on B. Policies (This Section B requests information about policies not required by the	e Internal Reve	nue C	1	
			<u> </u>	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		-
b	If "Yes," did the organization have written policies and procedures governing the activities of affiliates, and branches to ensure their operations are consistent with the organization's exem		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	•	11a	√	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		<u></u>		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	1	<u> </u>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give		12b	✓	<u> </u>
C	Did the organization regularly and consistently monitor and enforce compliance with the				
40	describe in Schedule O how this was done		12c	'	-
13 14	Did the organization have a written whistleblower policy?		13	ļ	1
					
15	Did the process for determining compensation of the following persons include a review a independent persons, comparability data, and contemporaneous substantiation of the deliberation				
а	The organization's CEO, Executive Director, or top management official		15a	-	
b	Other officers or key employees of the organization		15b		
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				ī
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or simi	lar arrangement			<u> </u>
	with a taxable entity during the year?		16a		√
b	If "Yes," did the organization follow a written policy or procedure requiring the organization				
	participation in joint venture arrangements under applicable federal tax law, and take steps t				<u> </u>
Sant:	organization's exempt status with respect to such arrangements?	· · · · ·	16b		<u> </u>
3ecti	on C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► Exempt from Arkansa	e filing			
18			T (0.		 -01/~\
10	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable (3)s only) available for public inspection. Indicate how you made these available. Check all that		-ı (Sed	ะแอก เ	ou I (C)
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain on So				
19	Describe on Schedule O whether (and if so, how) the organization made its governing docu	,	of inte	rest n	olicy
- •	and financial statements available to the public during the tax year.		J	p	y,
20	State the name, address, and telephone number of the person who possesses the organization	n's books and r	ecords	>	
	Lisa C/O Mike Boschetti 12115 Hinson Rd Little Rock, AR 72212 501-350-0511				

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Form	990	(201	9

Part VII	Compensation of Officers, Directors,	Trustees, Key Employe	es, Highest Compens	ated 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. See instructions for the order in which to list the persons above.

□ Check this box if neither the organization not	r any relate	a orga	anız	atio	n c	ompe	nsa	ited any current	omicer, director,	or trustee.
]			C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and title	Average hours per week	box,	unles er and	s pe d a d	rson irect	than of is both or/trust	an tee)	Reportable compensation from the	Reportable compensation from related	Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
(1) Dave Furman	40									
12115 Hinson Rd Little Rock, AR 72212		✓		✓						178,939
(2) Steve Snider	<1									
105 Noyant Little Rock, AR 72223		✓								
(3) Bill Wellons	<1									
r Roland AR 72135 Mike Boschetti		✓		_						<u>-</u> .
(4) Mike Boschetti	<2									
13101 Bart Moreland Dr Roland AR 72135		✓		✓						
(5)										
(6)										
(7)										-
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

Part	VII Section A. Officers, Directors, 1	Trustees,	Key I	Emj	plo	yee	s, an	d H	lighest Compe	nsated	Emplo	yees (cc	ntinu	ed)
	(A) Name and title	(B) Average hours per week	box,	unles	Pos neck ss pe d a d	rson	than of is both	an ee)	(D) Reportable compensation from the	(E) Report compens from re	able sation	(F) Estimated among of other compensation		
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organiza (W-2/1099	ations	,	n the ation ar	ıđ
(15)														
(16)														
(17)												_		
(18)														
(19)														
(20)		T												
(21)														
(22)														
(23)														
(24)														
(25)			-											
1b	Subtotal		٠.	•	•	•								
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)			٠	•	•		>					178	.939 .939
2	Total number of individuals (including but reportable compensation from the organic	t not limited						e) w	ho received mor 6	e than \$1	00,000	of	,,,,	
	reportable compensation from the organi	IZALION P										1	/es	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete											3		
4	For any individual listed on line 1a, is the organization and related organizations individual													
5	Did any person listed on line 1a receive of for services rendered to the organization													لــــــ
Secti	on B. Independent Contractors													
1	Complete this table for your five high compensation from the organization. Rep													
	(A) Name and business add	fress							(B) Description of sen	/ices		(C) Compensat	lon	
N														
														-
2	Total number of independent contractor received more than \$100,000 of compens							th	ose listed abov	e) who		٠		

Part	VIII	Statement of Revenue Check if Schedule O contains a re-	spons	se or note to an	v line in this Pa	rt VIII		🗆
	•••	Officer in Confedence of Confedence and	<u> </u>		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
र र	1a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b					
	C	Fundraising events	1c					
	d	Related organizations	1d					
Ç,∰	e	Government grants (contributions)	1e					
ig ig	f	All other contributions, gifts, grants,		4 204 402				
돌		and similar amounts not included above	1f	1,394,403				
풀	g	Noncash contributions included in lines 1a–1f	1g	•				
a So	h	Total. Add lines 1a–1f			1,394,403			
		Total, Add mics to the control of	Ė	Business Code	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
စ္ပ	2a			-				
ه ڲٙ	b							
S	С							
gram Ser Revenue	d							
Program Service Revenue	е							ļ
ا تة	f	All other program service revenue .						
	g	Total. Add lines 2a-2f						
	3	Investment income (including divident other similar amounts)						
	4	Income from investment of tax-exem				<u> </u>		
	5	Royalties		_				
	•	(i) Real	-	(ii) Personal				
	6a	Gross rents 6a						
	b	Less: rental expenses 6b						
	С	Rental income or (loss) 6c						
	d		•					
	7a	Gross amount from (i) Securit	ies	(ii) Other				
		sales of assets						
_		other than inventory 7a						
ther Revenue	þ	Less: cost or other basis and sales expenses . 7b						
, e	С	Gain or (loss) 7c						
æ	d	Net gain or (loss)		▶				
her	8a	Gross income from fundraising						
ō		events (not including \$					1	
		of contributions reported on line						
		1c). See Part IV, line 18	8a					
		Less: direct expenses	8b					
	С	Net income or (loss) from fundraising	g eve	nts ▶				
	9a	Gross income from gaming activities. See Part IV, line 19 .	9a					
	b	Less: direct expenses	9b		•			
		Net income or (loss) from gaming ac	$\overline{}$	s >				
		Gross sales of inventory, less						
		returns and allowances	10a					
	b	Less: cost of goods sold	10b					
	C	Net income or (loss) from sales of in	vento					
SI				Business Code		ļ		
Miscellaneous Revenue	11a						ļ	
scellaneo Revenue	b							
Rev	C	All all an annual and						
Mis –	ď	All other revenue		•			 -	-
	<u>е</u> 12				1,394,403			-
					.,00.,000	1	l	1

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All	other organizations	must complete colur	nn (A).
	Check if Schedule O contains a response	or note to any line			<u> </u>
	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 .				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	237,481	237,481		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	178,939	178 ,939		
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	•	717,373	658,642	58,731	
7 8	Other salaries and wages	717,073	000,042	00,701	
	section 401(k) and 403(b) employer contributions)	55,000	55,000		
9	Other employee benefits	66.600	66 660		
10	Payroll taxes	66,662	66,662		
11	Fees for services (nonemployees):				
a	Management				
b	Legal				
c d	Lobbying				
e	Professional fundraising services. See Part IV, line 17	-			
f	Investment management fees				2
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	46,345	46,345		
12	Advertising and promotion		·		
13	Office expenses	2,990		2,990	
14	Information technology		-		
15	Royalties				
16	Occupancy				
17	Travel	27,071		25,858	1,213
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance				
24	Other expenses, Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column			1	
	(A) amount, list line 24e expenses on Schedule O.)				
а	Postogo	155		155	
b	rostage	,,,,			•
c					
d					
e	All other expenses	155		155	
25	Total functional expenses. Add lines 1 through 24e	1,332,016	1,243,069	87,734	1,213
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here 🕨 🗌 if				
	following SOP 98-2 (ASC 958-720)	l			

P	art X				
		Check if Schedule O contains a response or note to any line in this Par	(A)	· -	<u> </u>
			Beginning of year		End of year
	1	Cash—non-interest-bearing	993,710	1	1,056,097
	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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).			
S	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a			
	ь	Less: accumulated depreciation 10b	· · · · · · · · · · · · · · · · · · ·	10c	
	11	Investments – publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	993,710	16	1,056,097
	17	Accounts payable and accrued expenses		17	
	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	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
賣		controlled entity or family member of any of these persons	 	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 parties, and other liabilities not included on lines 17–24). Complete Part X			
		of Schedule D	. =	25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
Net Assets or Fund Balances		Organizations that follow FASB ASC 958, check here ► ☐ and complete lines 27, 28, 32, and 33.	·		
<u>a</u>	27	Net assets without donor restrictions		27	-
ä	28	Net assets with donor restrictions		28	
힡		Organizations that do not follow FASB ASC 958, check here ▶ □			T - 2.
ij		and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
\ss	31	Retained earnings, endowment, accumulated income, or other funds		31	
et /	32	Total net assets or fund balances	993,710	32	1,056,097
ž	33_	Total liabilities and net assets/fund balances	993,710	33	1,056,097

rm 99	0 (2019)			Pag	ge 12
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)			1,394	4,403
2	Total expenses (must equal Part IX, column (A), line 25)			1,332	2,016
3	Revenue less expenses. Subtract line 2 from line 1			62	2,387
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))			993	3,710
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 on Schedule O)				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))			1,056	3,097
art	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>			<u></u>
		_		Yes	No
1	Accounting method used to prepare the Form 990: ☑ Cash ☐ Accrual ☐ Other	<u> </u>			
	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		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled	or			1
	reviewed on a separate basis, consolidated basis, or both:				ı
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?	·	2b		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited or	ı a 📗			
	separate basis, consolidated basis, or both:		i		I
	☐ 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				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		,
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O.	on			

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.

Form **990** (2019)

За

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

2019

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

ation. Inspection
Employer identification number

Rede	emer							27-19	
Pai			Reason for Public Char						ns
The 6 1 2 3 4	A	A ch A sc A ho A me aosp	tion is not a private founda urch, convention of church hool described in section spital or a cooperative hose edical research organization bital's name, city, and state	nes, or associations, o	on of churches descri Attach Schedule E (Fo anization described in anjunction with a hosp	bed in se orm 990 on section oital desc	ction 176 or 990-E2 1 70(b)(1 ribed in s	0(b)(1)(A)(i). (2).))(A)(iii). ection 170(b)(1)(A)(
5			organization operated for tition 170(b)(1)(A)(iv). (Com		college or university	owned o	r operate	d by a government	al unit described in
6 7	▼ A d	An c lesc	deral, state, or local govern organization that normally cribed in section 170(b)(1)	receives a subst (A)(vi). (Complet	tantial part of its supp e Part II.)	oort from	n 170(b) a govern	(1)(A)(v). nmental unit or from	the general public
8			mmunity trust described in						
9	o u	r ur Iniv	gricultural research organi niversity or a non-land-gra ersity:	nt college of agri	culture (see instruction	ns). Ente	r the nam	ne, city, and state of	the college or
10	r s	icdi ece	organization that normally r opts from activities related port from gross investmen uired by the organization a	to its exempt fur t income and unr fter June 30, 197	nctions—subject to co related business taxal 75. See section 509(a	ertain exc ole incom 1)(2). (Cor	eptions, e (less se nplete Pa	and (2) no more that ection 511 tax) from art III.)	า 33¹⁄₃% of its
			organization organized and						
12	c	of o	organization organized and ne or more publicly suppo ck 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		t	Type I. A supporting organ he supported organization supporting organization. Y o	(s) the power to ou must comple	regularly appoint or e ete Part IV, Sections	lect a ma A and B.	jority of t	he directors or trust	ees of the
b	· [0	Type II. A supporting orgal control or management of organization(s). You must	the supporting o complete Part I	rganization vested in V, Sections A and C.	the same	persons	that control or man	age the supported
C	: []] "	Type III functionally integ ts supported organization(rated. A supports) (see instruction	ting organization oper ns). You must comp l	ated in colete Part	onnection IV, Secti	n with, and functions ons A, D, and E.	ally integrated with,
d		t	Type III non-functionally in the is not functionally integrated in the instructionally integrated in the instruction in the ins	grated. The orga	nization generally mus	st satisfy	a distribu	ition requirement an	
e		f	Check this box if the organ functionally integrated, or	Type III non-func	tionally integrated sur	oporting o	ne IRS tha organizat	at it is a Type I, Type ion.	e II, Type III
f	En	ter	the number of supported o	organizations .					
9	Pro	ovic	le the following information		orted organization(s).				
	(ī) Na	ame	of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you docui	r governing nent?	(v) Amount of monetary support (see Instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
(A)								_	
(B)				_					
(C)									
(D)									
(E)									

Total

Schedu	18 A (FOITH 990 OF 990-LZ) 2019						3
Part	II Support Schedule for Organiza	ations Descri	bed in Secti	ons 170(b)(1	(A)(iv) and 1	70(b)(1)(A)(vi)
	(Complete only if you checked the	ne box on line	5, 7, or 8 of	Part I or if the	e organizatio	n failed to qua	alify under
	Part III. If the organization fails to	qualify unde	r the tests lis	ted below, pl	ease comple	te Part III.)	
	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1,067,464	1,374,207	1,424,948	1,396,569	1,394,403	6,657,591
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	_	1,067,464	1,374,207	1,424,948	1,396,569	1,394,403	6,657,591
4	Total. Add lines 1 through 3	1,007,404	1,374,207	1,727,570	1,530,503	1,004,400	0,007,001
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						6.657.591
	on B. Total Support	/					
	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	1,067,464	1,374,207	1,424,948	1,396,569	1,394,403	6,657,591
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.)						0.057.504
11 12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc.	(coo instruction	nne)			12	6,657,591
13	First five years. If the Form 990 is for the						n 501(c)(3)
13	organization, check this box and stop he						
Secti	ion C. Computation of Public Support	rt Percentag	<u></u>	 			
14	Public support percentage for 2019 (line			1. column (f))		14	100 %
15	Public support percentage from 2018 Sci					15	100 %
16a	331/3% support test-2019. If the organ	ization did not	check the box	c on line 13, ar	nd line 14 is 33	31/3% or more,	check this
	box and stop here. The organization qua						
b	331/3% support test-2018. If the organi	ization did not	check a box o	n line 13 or 16	a, and line 15	is 331/3% or m	ore, check
	this box and stop here. The organization	ı qualifies as a	publicly suppo	rted organızati	on		▶ ☑
17a	10%-facts-and-circumstances test-2						
	10% or more, and if the organization me						
	Part VI how the organization meets the '			_	•		
	organization						-
b	10%-facts-and-circumstances test -2						
	15 is 10% or more, and if the organiza						
	Explain in Part VI how the organization				ine organizati	on qualities as	a publicly
40	supported organization						· · 🟲 🗀
18	instructions	іц пот спеск а	DUX ON IINB 13	, 10a, 100, 1/a	i, or 170, chec	k unis box and	▶ ["

Part	Support Schedule for Organiza	tions Descr	ibed in Sect	ion 509(a)(2)			
	(Complete only if you checked the						nder Part II.,
	If the organization fails to qualify	under the te	sts listed bel	ow, please co	omplete Part	11.)	
	on A. Public Support					4 3 0040	
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")					ļ	ļ
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					A STATE OF THE STA	
	organization's benefit and either paid to				/	1	
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5				/		
	Amounts included on lines 1, 2, and 3				7		_
	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			1			
8	Public support. (Subtract line 7c from		/				
Ū	line 6.)						
Secti	on B. Total Support	<u></u>	<u> </u>	l	<u> </u>	L	
	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6	(=) =====	/		(=,, == : =	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
_	Gross income from interest, dividends,		,			<u> </u>	
IVA	payments received on securities loans, rents,						
	royalties, and income from similar sources .						
ь	Unrelated business taxable income (less					<u> </u>	
U	section 511 taxes) from businesses		ļ				
	acquired after June 30, 1975						
_	Add lines 10a and 10b	/			<u> </u>	 	
11	Net income from unrelated business		_				
11	activities not included in line 10b, whether						}
	or not the business is regularly carried on		1				
40	Other income. Do not include gain or				· · · · · · · · · · · · · · · · · · ·	 	
12	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,		-		 	 	
13	and 12.)					i	
14	First five years. If the Form 990 is for the	L	a's first secon	d third fourth	or fifth tax v	ear as a section	n 501(c)(3)
17	organization, check this box and stop he	-					
Secti	on C. Computation of Public Suppor						· · · · <u></u>
15	Public support percentage for 2019 (line			13 column (fl)		15	%
16	Public support percentage from 2018 Sci		•			16	
	on D. Computation of Investment In						
17	Investment income percentage for 2019 (hy line 13 colu	ımn (fl)	17	%
18	Investment income percentage from 2018					18	
19a	33/2% support tests—2019. If the organ						
134	17 is not more than 331/2%, check this box						
la a	331/3% support tests—2018. If the organiz		-			=	_
"	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di	=	_				=
	i ilitate ivalidativii. Il tile digaliizativii di	a not oneon a	207 OH III C 14	, .ou, or rob,	CHOOK HIS DOV		

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.)

Secti	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete F on A. All Supporting Organizations	uit v	·/	
	The state of the s		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	_	
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 Part VI when and how the organization made the determination.	3b		
С	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		
b	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		
5а	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	_	
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	†	
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.	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.	102		

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	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		ļ
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
<u>Secti</u>	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 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		ļ
2	Did the organization operate for the benefit of any supported organization other than the supported	1		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,] .]
	supervised, or controlled the supporting organization.			ــــا
Coati		2	L	Ь
Secu	on C. Type II Supporting Organizations		Yes	No
1	More a majority of the averagination's divestors on taustood during the tay year also a majority of the divestors		res	140
•	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	Ì		
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		┦
Secti	on D. All Type III Supporting Organizations			
	on promoupporting organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			<u> </u>
•	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		
Secti	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 in	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 (section Test. Answer (a) and (b) below.	see in:		
2			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			1
-	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.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			, l
_	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a	 -	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			Ī
	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 Organical Part V	jani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	j tru:	st on Nov. 20, 1970 (expl	ain in Part VI). See
instructions. All other Type III non-functionally integrated supporting organ	izat	ions must complete Sect	ions A through E.
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4	_ _	
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or		_	
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) 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):			
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		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):	l		
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,	П		
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 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-functional	y int	egrated Type III supporti	ng organization (see
instructions).			

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued)	
Sect	ion D-Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
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	nızations	
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.		<u> </u>	
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	h the organization is res	ponsive	
9	Distributable amount for 2019 from Section C, line 6	· · · · · · · · · · · · · · · · · · ·		
10	Line 8 amount divided by line 9 amount			
	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(ili) Distributable Amount for 2019
_1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
a	From 2014			
	From 2015		15 1,	
	From 2016			
	From 2017			
e	From 2018			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
	Carryover from 2014 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3ı from 3f.			
4	Distributions for 2019 from		. =	
	Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j and 4c.			
8	Breakdown of line 7:			
<u>a</u>				
b	Excess from 2016			
c	Excess from 2017		· · · · · · · · · · · · · · · · · · ·	
d	Excess from 2018			
<u>e</u>	Excess from 2019			

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PAGE	О

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.)
	1

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

Redee	emer Dubai						-1975559					
Par	General Information Form 990, Part IV, line	on Activit	ties Outside	the United States. Com	nplete if the orga	anization ar	nswered "Yes" on					
1	For grantmakers. Does the other assistance, the grante award the grants or assistan	es' eligibility	y for the gran	cords to substantiate the atts 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	l other assistance					
3	Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)											
	(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 lists a program se describe specif service(s) in th	ervice, ic type of	(f) Total expenditures for and investments in the region					
(1)												
(2)												
(3)					-							
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
(11)												
(12)							<u> </u>					
(13)												
(14)												
(15)												
(16)												
(17)												
3a	Subtotal											
b	Total from continuation sheets to Part I						<u></u>					
С	Totals (add lines 3a and 3b)		T *									

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, othe
(1)		Middle East	Church support	207,459	Wire transfers			
(2)		Middle East	Church support	5,977	Wire transfers			
(3)		Middle East	Church support	24,045	Wire transfers			
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
10)								
[1]								
12)								
13)		-						
14)						-}		
15)							***************************************	
16)								

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncesh assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other
1)							
2)							
3)	·						
4)							
5)							
6)	<u></u>						
7)							
8)							
(9)							
0)							
1)							
2)							
3)							
4)							
5)						-	
6)							
n							
B)							

Schedule F (Form 990) 2019

Раде	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	orm 990) 2019 Page 5
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 \$207,4	594 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
The \$5,977	consists of grants 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	meralaın com
The \$24,04	5 grant is to Redeemer Church Dubai's church plant in Beirut, Lebanon (City Bible Church) - Financial oversight and
accountabil	ity is a natural ongoing activity due to common leadership. Its website is www.cbcbeirut.com
	1

SCHEDULE J (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

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

2019

nation.

Employer identification number

Open to Public
Inspection

27-1975559 Redeemer Dubau **Questions Regarding Compensation** Part I No Yes 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ✓ Housing allowance or residence for personal use ☐ First-class or charter travel Payments for business use of personal residence ☐ Travel for companions Health or social club dues or initiation fees ☐ Tax indemnification and gross-up payments Personal services (such as maid, chauffeur, chef) ☐ Discretionary spending account b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line ✓ 2 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☐ Written employment contract ☐ Compensation committee ☐ Compensation survey or study Independent compensation consultant Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: J 4a ✓ b Participate in, or receive payment from, a supplemental nonqualified retirement plan? . . . 4b Participate in, or receive payment from, an equity-based compensation arrangement? 4c **√** If "Yes" to any of lines 4a-c, list the persons and provide the applicable 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. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a J a The organization? 5b J If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a 6b ✓ **b** Any related organization? If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in

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		(B) Breakdown of W-2 and/or 1099-MISC compensation		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(ī) Base compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(f)-(D)	in column (B) reported as deferred on prior Form 990
Dave Furman, President and	n	101,221				77,718	178,939	
1 Lead Pastor	(ii)					<u> </u>		
	(I)							
2	(11)			***************************************				
-	(1)				l"			
3	(11)			•••••				
	(I)	-						
4	(ii)		***************************************					•••••
	(I)							
5	(11)			***************************************				
	(1)							
6	(11)			*	1			
	(1)							
7	(11)				T			
	(ī)							
8	(II)							
	(1)							
9	(11)							
	(1)				1			
10	(11)							
	0			}				
11	(11)							
	(1)							
12	(ii)							
	(1)							
13	(11)_							
	(1)							
14	(11)							
	(1)							
15	(11)							
	(1)							
16	(11)	[I	i	1	1		

Schedule J (Form 990) 2019

chedule J (Form 990) 2019	Page 3
Part III Supplemental Information	
rovide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for or any additional information.	r Part II. Also complete this part
Redeemer Dubai Church (which is partially support by Redeemer Dubai) and its board of elders determines the compensation for its pastors including Dave Furma	n, the Lead Pastor The
process includes a provision that any compensated employee does not participate in determining the compensation level	

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Schedule J (Form 990) 2019

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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

2019

Open to Public Inspection

Name of the organization
Redeemer Dubai

Part III 4d Other Program Services

Expenses 150,421 Including Grants 24,045

To help equip staff to serve in the churches Redeemer Dubai supports, it supports a City Bible Church in Beirut by providing

payroll and grants

Total "Other Program Services" **Expenses** 150,421 Including Grants 24,045 Part VI - Lines 12b, 12c and 19 Redeemer Dubar'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 \$117,461