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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

2008 Open to Public Inspection

> X Yes No Form **990** (2008)

and ending For the 2008 calendar year, or tax year beginning **Employer identification number** Please Check if applicable: C Name of organization Mercy-USA For Aid & Development, Inc use IRS Address change label or 38-2846307 Name change print or Room/suite Telephone number Number and street (or P.O. box if mail is not delivered to street address) type. Initial return 734-454-0011 201 See 44450 Pinetree Drive Specific 4,966,441 G Gross receipts \$ City or town, state or country, and ZIP + 4 Termination Instruc-MI 481703869 Plymouth tions. Amended return H(a) Is this a group return for F Name and address of principal officer: Application pending X affiliates? Are all affiliates included? If "No," attach a list. (see instructions) **X** 501(c) **3**) **◄** (insert no.) 4947(a)(1) or H(c) Group exemption number ▶ Website: > www.mercyusa.org M State of legal domicile: Year of formation: Type of organization: X Corporation Part I Summary Briefly describe the organization's mission or most significant activities: Mercy-USA is dedicated to alleviating human suffering and supporting Governance individuals and their Communities in their own efforts to become more self-sufficient. 2 Check this box ▶ │ │ if the organization discontinued its operations or disposed of more than 25% of its assets. 3 Number of voting members of the governing body (Part VI, line 1a) Activities & 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 Total number of employees (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 7a Total gross unrelated business revenue from Part VIII, line 12, column (C) 7b b Net unrelated business taxable income from Form 990-T, line 34 Prior Year **Current Year** 258 4,897,467 3,441, 8 Contributions and grants (Part VIII, line 1h) 9,692 800 9 Program service revenue (Part VIII, line 2g) 96,531 53,591 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 5,527 5,691 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 3,544,116 4,966,441 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 281,907 273,375 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 872,323 665,829 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 2,073,354 3,629,494 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 4,783,724 3,012,558 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 531,558 182,717 19 Revenue less expenses. Subtract line 18 from line 12 End of Year Beginning of Year 3,350,892 3,208,511 20 Total assets (Part X, line 16) 205,150 123,795 21 Total liabilities (Part X, line 26) 3,145,742 716 22 Net assets or fund balances. Subtract line 21 from line 20 084. Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here Signature of officer President Umar al-Qadi Type or print name and title Preparer's identifying number Check if Preparer's Paid 11/12/09 employed P00151934 signature Preparer's Alan C. Young & Associates, P.C. 38-2463166 EIN Firm's name (or yours **Use Only** 7310 Woodward Ave Ste if self-employed), address, and ZIP + 4 313-873-7500 Detroit, MI

May the IRS discuss this return with the preparer shown above? (see instructions)

DAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2008)

Form 990 (2008) Mercy-USA For Aid & Development, Inc 38-2846307

F.a	t IV Checklist of Required Schedules		Yes	No
	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	\Box	163	140
	complete Schadula A	1	x	
	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
3	andidates for rublic office? If "Vos." complete Schodule C. Bart I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
-	Cabadula C. Bad II	4		X
5	Scriedule C, Part II Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
•	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where 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		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; 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		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VII, VIII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a	X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b	X	<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	X	<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance		1	l
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
04-	Schedule J	23	-	X
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 questions	1		
L	24b–24d and complete Schedule K. If "No," go to question 25.	24a	<u> </u>	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
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?			İ
d		24c		
25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	-	1
_Ja	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	05-	1	v
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified	25a	 	X
	moreon from a prior year? If #Vee # provedete Ochs dule I. Dad I	2Eh		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	25b	 	<u> </u>
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		x
~~	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or	20	1	1
27				1

Form 990 (2008) Mercy-USA For Aid & Development, Inc 38-2846307 Part IV Checklist of Required Schedules (continued)

888, 89.£	rt IV Checklist of Required Schedules (continued)		Yes	No
28 a	During the tax year, did any person who is a current or former officer, director, trustee, or key employee: Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			v
	Part IV	28a	-	X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		x
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			37
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c	77	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	├
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		x
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		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x

Form 990 (2008) Mercy-USA For Aid & Development, Inc 38-2846307

Part V Statements Regarding Other IRS Filings and Tax Compliance

Har	Statements Regarding Other IRS Fillings and Tax Compliance			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1		169	140
	U.S. Information Returns. Enter -0- if not applicable	1a 6			
	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	ortable			
	gaming (gambling) winnings to prize winners?		1c	X	
	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	2a 4			
	If at least one is reported on line 2a, did the organization file all required federal employment tax return	s?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see				
	instructions)				
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	by			
	this return?		3a		_X_
b	If "Yes," has it filed a Form 990-T for this year? If "No," 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 a	uthority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other fina				
	account)?		4a	X	
b	If "Yes," enter the name of the foreign country: ▶ See Schedule				
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign E	ank			
	and Financial Accounts.				/- <u></u>
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact	ion?	5b		X
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity				
	Regarding Prohibited Tax Shelter Transaction?				**
6a			<u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributio	ns or			
	gifts were not tax deductible?		6b	**********	**********
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more	han	_		- T
	\$75?		7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		\vdash
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa	S			x
	required to file Form 8282?		7c	*******	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	ersonai	7.		X
_	benefit contract?		7e 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control				X
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g		+
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C required?	, as	7h		x
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec				
J	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a spor				
			8	1 000000000000000000000000000000000000	X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.				
a	Pitti ti		9a	***********	X
b	Did the organization make any taxable distributions did section 4000: Did the organization make a distribution to a donor, donor advisor, or related person?			1	X
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
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	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
12a		1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			

Form 990 (2008) Mercy-USA For Aid & Development, Inc 38-2846307

Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

<u>Sec</u>	tion A. Governing Body and Management			· · · · · · · · · · · · · · · · · · ·		
-					Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe	the				
	circumstances, processes, or changes in Schedule O. See instructions.	_				
1a	Enter the number of voting members of the governing body	1a 3		_		
b	Enter the number of voting members that are independent	1b 3		_		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with				
	any other officer, director, trustee, or key employee?			2		X
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 per			3		X
4	Did the organization make any significant changes to its organizational documents since the prior For	m 990 wa	s filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's asset	s? ,		5		X
6	Does the organization have members or stockholders?			6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	mbers				
	of the governing body?			7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other pers			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken d	luring				
	the year by the following:					
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	<u> </u>
9a	Does the organization have local chapters, branches, or affiliates?		, , . , , , , ,	9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such c			-		
	affiliates, and branches to ensure their operations are consistent with those of the organization?			9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organization's	ganizations	S			
	must describe in Schedule O the process, if any, the organization uses to review the Form 990			10	X	<u> </u>
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be re					
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			11		X
Sec	tion B. Policies					
					Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that cou	ld give			İ	
	rise to conflicts?			12b	X	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes,"				
	describe in Schedule O how this is done			12c	X	
13	Does the organization have a written whistleblower policy?			13	X	
14	Door the organization have a written document retention and destruction reliance			1 44	X	
15	Did the process for determining compensation of the following persons include a review and approva					
	independent persons, comparability data, and contemporaneous substantiation of the deliberation ar	nd decision	n:			
а	The organization's CEO, Executive Director, or top management official?			15a	X	1
b	Other officers or key employees of the organization?			15b	X	
	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 arranger	ment				
	with a taxable entity during the year?			16a	1	X
b		uate				
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to sa	feguard				
	the organization's exempt status with respect to such arrangements?			16b	4	A. B
Sec	ction C. Disclosure				•	
17	List the states with which a copy of this Form 990 is required to be filed CA, IL, MI, NJ					
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T	(501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply.	. , ,				
	X Own website X Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	conflict of i	interest			
	policy, and financial statements available to the public.	-,-,				
20	State the name, physical address, and telephone number of the person who possesses the books ar	nd records	of the			
	organization: > Umar-Al-Qadi 44450 Pinet					
_ P		4I 48		4-45	4-0	0011

Part VII Compensation of Officers, Directors, Trustees, Key Employees, 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. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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 <u>compensated employees</u>; and former such persons.

(A) Name and Title	(B) Average	Posi	tion (((checi	C) k all t	hat a	oply)	(D) Reportable	(E) Reportable	(F) Estimated
Name and Title	hours per week	Individual trustee or director		Officer		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Zakia Mahasa Chairperson	1	x		х				o	0	1
Faizil Baksh				A				0	<u> </u>	
Board Member	1	x						ol	o	
Dr. Ali El-M										
Board Member	1	X			<u> </u>			0	0	
Umar al-Qadi Pres./CEO	40			x				63,496	0	15,83
Anas Alhaida CFO	r 40			x				60,750	o	11,42
					<u> </u>					
			+	\vdash	+-	+	 			

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•	Form 990 (2008) Mercy	√-USA F	or	Aid	٤	Development, Inc	38-2846307

	(A) lame and title	(B) Average	Po	ositior	ı (che	(C) ck al	ll tha	t app	ıly)	(D) Reportable	(E) Reportable	(F) Estimated
r	ame and une	hours per week	<u> </u>	Individual trustee					Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
					_	1	_	\downarrow				
. ,												
						1						
		distribute (in alcalina							▶ a th	124,246 an \$100,000 in reportable		27,257
	organization ▶ 0	induals (including	those in	ia) w	110 16		veu	IIIQII	Ç (II	an \$100,000 in reportable	compensation nom the	I.v. I.v.
5	employee on line 1 For any individual the organization ar individual Did any person list services rendered	a? If "Yes," complisted on line 1a, is not related organizated on line 1a receito the organization	ete Sched the sum of tions great tive or acci	lule J of rep ater th rue c	for sortal	ble o	o ind com 0,000	pens 0? If	ual satio "Ye m ai	oyee, or highest compensation and other compensations," complete Schedule J fing unrelated organization for such person	n from or such for	4 X
Sect 1		e for your five high	est compe	ensat	ed in	dep	end	ent d	conf	tractors that received more	e than \$100,000 of	
	compensation fron	n the organization. (A) Name and business	address							Descr	(B) iption of services	(C) Compensation
2	Total number of in	dependent contrac	tors (inclu	iding	thos	e in	1) v	vho r	rece	eived more than \$100,000	in	

Form 990 (2008) Mercy-USA For Aid & Development, Inc 38-2846307

Par	t VII	Statem	ent of Rev	enue			(A)	(B)	(C)	(D)
							(A) Total revenue	(B) Related or exempt	Unrelated	Revenue excluded from tax
								function	business revenue	under sections
				. 1				revenue		512, 513, or 514
		Federated cam	· - · · · ·	1a	·					
P		Membership du		1b						
g't		Fundraising eve		1c						
<u>e'a</u>		Related organiz		1d		11 207				
Contributions, gifts, grants and other similar amounts		Government grants (d		1e_		11,307				
걸닐		All other contributions and similar amounts			4 20	26 160				
열			l			26,160				
	_	Noncash contribution				06,612	4,897,467			
	h	Total. Add line	s 1a-1f			Busn. Code	4,031,401			
Program Service Revenue	2-	-	T			Busii. Code	9,692	9,692		
Š	2a	Program					5,002			
8	b									
Š	C									
n S	d									
gra	f All other program service revenue									
Po	-	Total. Add line					9,692			
	_	Investment inc								
		other similar a	=	_		•	53,591			53,591
	4	Income from it				roceeds ►				
	5	Royalties								
			(i) Rea			ersonal				
	6a	Gross Rents								
	b	Less: rental exps.								
		Rental inc. or (loss)								
	d	Net rental inco								
	7a	Gross amount from	(i) Securi			Other				
		sales of assets other than inventory								
	b	Less: cost or other]			
		basis & sales exps.								
	С	Gain or (loss)								
	d	Net gain or (lo	oss)		<u></u>	▶				
	8a	Gross income fr	om fundraising e	events						
ne	!	(not including \$								
/en		of contributions	reported on line	1c).	·					
Re		See Part IV, line	18		a					
Other Revenue	b	Less: direct e			b		_			
ទី		Net income of			sing events	<u></u>				
	9a	Gross income fr		vities.						
		See Part IV, line			а		4			
		Less: direct e			b					
		Net income o	_	-	activities .	<u></u>				
	10a	Gross sales of	•	SS						
	١.	returns and a			a		4			
		Less: cost of			b		_			
	 c	Net income o	r (loss) from s cellaneous Reve		t inventory	Buch Carl				
	110					Busn. Cod		2 05		
	11a b		SALE OF EQU				3,25			
	C	SALES	FOREIGN CUI	• • • • •			720			
	d	· · · · · · · · · · · · · ·	 nue				/2	/20		
		Total. Add lin	other revenuetal. Add lines 11a–11d			5,693				
	12		e. Add lines 1	h, 2a	3, 4, 5, 6d	7d. 8c.				
		9c, 10c, and		-			4,966,443	15,383	3 0	53,591

Statement of Functional Expenses Part IX

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. ations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). Do not include amounts reported on lines 6b, (A)													
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses										
			5.qonooo	9an arthura	1									
	Grants and other assistance to governments and	210,925	210,925											
	organizations in the U.S. See Part IV, line 21	210,323	220,020											
	Grants and other assistance to individuals in													
	the U.S. See Part IV, line 22													
3	Grants and other assistance to governments,													
	organizations, and individuals outside the	70 002	70,982											
	U.S. See Part IV, lines 15 and 16	70,982	10,962											
	Benefits paid to or for members													
5	Compensation of current officers, directors,													
	trustees, and key employees													
6	Compensation not included above, to disqualified													
	persons (as defined under section 4958(f)(1)) and													
	persons described in section 4958(c)(3)(B)	015 546	744 201	51,279	19,976									
7	Other salaries and wages	815,546	744,291	51,219	19,910									
8	Pension plan contributions (include section 401(k)													
	and section 403(b) employer contributions)	- FA A4A	20.242	17 607										
9	Other employee benefits	50,040	32,343											
10	Payroll taxes	6,737	136	6,601										
11	Fees for services (non-employees):	22 22	20 000		E00									
а	Management	39,303	38,803		500									
b	Legal	4,053	3,753											
	Accounting	24,268	12,560	11,708										
d	Lobbying													
е	Professional fundraising services. See Part IV, line 17													
f	Investment management fees													
g	Other													
12	Advertising and promotion	64,385		7,649										
13	Office expenses	41,839	36,044	5,795										
14	Information technology													
15	Royalties													
16	Occupancy	99,895	88,044											
17	Travel	122,750	121,043	1,707										
18	Payments of travel or entertainment expenses													
	for any federal, state, or local public officials													
19	Conferences, conventions, and meetings	1,215		1,215	5									
20	Interest													
21	Payments to affiliates													
22	Depreciation, depletion, and amortization	22,299	18,697											
23	Insurance	2,211		2,211										
24	Other expenses. Itemize expenses not													
	covered above. (Expenses grouped together													
	and labeled miscellaneous may not exceed													
	5% of total expenses shown on line 25 below.)													
а	- · · · · · · · · · · · · · · · · · · ·	2,668,866	2,668,860											
b	* * * * * * * * * * * * * * * * * * * *	234,563	234,563											
С	Transportation Expenses	153,385	152,130											
d	Bank Charges/Currency Flu	67,152	42,091	1,516										
е	Telephone	37,507	34,258	3,249										
f	All other expenses	45,803												
25	Total functional expenses. Add lines 1 through 24f	4,783,724												
26	Joint Costs. Check here ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	•												
DAA				·	Form 990 (2000)									

Form 990 (2008) Mercy-USA For Aid & Development, Inc 38-2846307

**		Baiance Sneet							
					(A) Beginning of year		(B) End of		
	1	Cash—non-interest bearing			2,384,920	1	3,0:		773
	2					2		/ -	
	3	Pledges and grants receivable, net							
	4	A accounte receiveble met			279.486		2.	71,0	161
	5	* * * * * * * * * * * * * * * * * * * *			2,5,100			- / \	, , ,
				•		_			
	6			• • • • • • • • • • • • • • • • • •				********	*******
	_	·							
w	7				10 390			A (200
et	8	2 2 2 2 2 2 3 3 3 3						4,	000
Assets	9	Prepaid expanses and deferred charges			E 624		-		206
٩		Land buildings and equipment; seet basis	1 40-1	102 764	5,624	9		3 , :	996
		Land, buildings, and equipment: cost basis	10a	192,764					
	D	5 11 11 15 1	401	146 070	EA 733			4 6	
	44							46,	
	11	investments—publicly traded securities			4/1,/68	11		3,	<u> 276</u>
	12	investments—other securities. See Part IV, line 11		12					
	13					13			
	14				F 600	14		_	
	15	Other assets. See Part IV, line 11				15	-		<u>600</u>
_	16					16	3,3		
	17				123,795	17	1	34,0)41
s	18			18					
	19	Deferred revenue		19		21,:	<u> 109</u>		
	20	Tax-exempt bond liabilities			20				
ţį	21	Escrow account liability. Complete Part IV of Schedule D) <i></i> .			21			
Liabilities	22		•	,					
ā									
_					22				
	23	Secured mortgages and notes payable to unrelated third			23				
	24					24			
	25	Other liabilities. Complete Part X of Schedule D				25		_	
	26	Total liabilities. Add lines 17 through 25			123,795	26	2	05,:	<u>150</u>
nces		<u>-</u>	and						
Ĕ									
Bala	27	Unrestricted net assets				27	2,4		
8	28	Temporarily restricted net assets			636,987	28	6	8 7 ,	<u> 503</u>
Fund	29	Permanently restricted net assets			***************************************	29			
正			e ▶						
ō									
ţ	30					30			
Assets	31	Paid-in or capital surplus, or land, building, or equipment	fund			31			
Ä	32	Retained earnings, endowment, accumulated income, or	r other fun	nds		32			
Net	33					33	3,1	45,	742
Titron	34				3,208,511	34	3,3	50,8	392
	art)	Financial Statements and Reporting							
							Firm	Yes	No
1		· · · · · · · · · · · · · · · · · · ·							
2					ntant?		2a		<u> </u>
							2b	X	
•		Yes" to lines 2a or 2b, does the organization have a comm							
_		e audit, review, or compilation of its financial statements a					2c	_X_	
3		a result of a federal award, was the organization required	to underg	go an audit or audits as	set forth in				
		Single Audit Act and OMB Circular A-133?					3a	X	
) It "	Yes," did the organization undergo the required audit or a	<u>udi</u> ts?	<u></u>		,	3b	X	

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Mercy-USA For Aid & Development, Inc

Employer identification number 38–2846307

Pa	πI	Reaso	n for Pu	blic Charity S	Status (All	organizatior	ns must	cor	mplete	this p	art.) (s	see in	structi	ions)			
The	orgar			undation because													
1	Ň			churches, or asso						(A)(i).							
2	П			ction 170(b)(1)(A													
3	П	A hospital or a	cooperativ	ve hospital service	e organizatio	n described in s	ection 17	70(b)	(1)(A)(i	ii). (Attad	ch Sched	dule H.)					
4	П	A medical res	earch orga	nization operated	in conjunctio	n with a hospita	al describe	ed in	section	170(b)	(1)(A)(iii). Enter	the hos	spital's	name,		
		city, and state		·													
5	\Box	An organization	n operated	for the benefit of	f a college or	university owne	ed or oper	ated	by a go	vernme	ntal unit	describ	ed in				
-	ш	-		(Complete Part I													
6	\Box			government or go		nit described in	section	170(b)(1)(A)	(v).							
7	X	An organization	on that nor	mally receives a s	ubstantial pa	rt of its support	from a go	overn	mental	unit or f	rom the	general	public				
•	ت)(b)(1)(A)(vi). (Co													
8	\Box			ibed in section 1			art II.)										
9	П			mally receives: (1				m co	ontributi	ons, me	mbershi	p fees,	and gro	ss			
-	ш			elated to its exem													
		support from	gross inves	stment income an	d unrelated b	usiness taxable	income ((less	section	511 tax) from b	usiness	es				
				ation after June 30													
10	П			ed and operated e							(see ins	truction	s)				
11	П			ed and operated e													
				publicly supporte													
				x that describes th													
		a Type				Type III-Functi				d		e III–Ot	her				
е	П			ertify that the org	anization is n	ot controlled dir	ectly or in	dire	ctly by o	ne or m	ore disq	ualified					
				dation managers									section	I			
		509(a)(1) or s															
f		, , , ,		ved a written dete	rmination from	n the IRS that i	t is a Typ	e I, T	ype II,	or Type	III suppo	rting					
		organization,															
g		Since August	17, 2006,	has the organizat	tion accepted	any gift or con	tribution fi	rom a	any of t	ne							_
Ū		following per		_													
		• .		ctly or indirectly co	ntrols, either	alone or togeth	er with pe	erson	ns desci	ribed in (ii)					Yes	No
				governing body o											11g(i)		
				f a person describ		•									11g(ii)		
				ntity of a person o											11g(iii)		
h				formation about t												•	
		e of supported	Γ	(ii) EIN	· -	of organization			ganization	(M Did)	you notify	(vi)	s the		(vii) Am	ount of	
,		ganization		(11) [11]		ed on lines 1–9	1 ' '	-	ed in your	1 ''	nization in		ion in col.	·	supp		
						or IRC section	gover	ning do	ocument?		of your		zed in the				
					(see II	nstructions))	Yes		No	Yes	port? No	Yes	S.? No				
							16:	•	140	165	140	162	NO				
										}							
								-									
_										 		-					
								\dashv		-		 					
_				11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		****	-			——		<u> </u>					
Tot			l		l					1	1	1	.	l			

Schedule A (Form 990 or 990-EZ) 2008 Mercy-USA For Aid & Development, Inc 38-2846307

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

Page 2

(Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Gifts, grants, contributions, and membership fees received. (Do not 3,441,258 4,897,467 21,146,286 include any "unusual grants.") 5,058,439 5,236,789 2,512,333 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1-3 3,441,258 4,897,467 21,146,286 5,058,439 5,236,789 2,512,333 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) 21,146,286 Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) (d) 2007 (e) 2008 (f) Total (a) 2004 (b) 2005 (c) 2006 Amounts from line 4 4,897,467 21,146,286 5,058,439 5,236,789 2,512,333 3,441,258 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 197,859 24,037 41,874 51,006 53,591 27,351 sources 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 3,975 (Explain in Part IV.) 1,750 2,052 18,285 77,114 11 Total support. Add lines 7 through 10 21,421,259 12 12 Gross receipts from related activities, etc. (see instructions) 11,966 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 14 98.7164 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 15 15 98.9530 % 16a 33 1/3 % support test—2008. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support test-2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and **stop here**. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test-2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part 1)

Sact	tion A. Public Support	cked the box	OII line 3 OI I e				
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
Oui	citical year (or itsear year seguining in, p	(u) 2004	(8) 2000	(6) 2000	(1) 100	(0,200	(1)
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 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 1-5				-		
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 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)				1		
14	First five years. If the Form 990 is for the	=	rst, second, third, fo	ourth, or fifth tax y	ear as a section 50	01(c)(3)	_
	organization, check this box and stop her						<u></u> ▶ ∟
	ction C. Computation of Public Sc						I
15	Public support percentage for 2008 (line 8	i, column (f) divid	led by line 13, colu	mn (f))		15	%
16 Sec	Public support percentage from 2007 Schetion D. Computation of Investme	edule A, Part IV- ent Income P	A, line 27g ercentage			16	%
17	Investment income percentage for 2008 (3, column (f))		17	%
18	Investment income percentage from 2007					مدا	%
19a	33 1/3 % support tests—2008. If the orga						
	17 is not more than 33 1/3 %, check this I		_			•	▶ [
b							
	line 18 is not more than 33 1/3 %, check t						▶ ∟
20	Private foundation. If the organization did	d not check a ho	v on line 14 10a or	10h check this h	av and can instruc	tiona	.

Schedule A (I	Supplemental In	on Mercy-USA Formation. Complete to the comple	his part to provid	e the explanation red	38-2846307 quired by Part II, line 10; nation. (see instructions	Page 4
Dart 1		- Other Income		ther additional inform	iation. (See instructions,	,
	11, 1116 10	- Other Income	Decail	•••••	•••••	• • • • • • • • • • • • • • • • • • • •
Sales			\$	1,143		
Gain o	on Sale of As	ssets	\$	12,357		
Reali	zed Gain on 1	Investments	\$	63,614		
• • • • • • • • • • • • • • • • • • • •						
• • • • • • • • • • • • • • • • • • • •						

• • • • • • • • • • • • • • • • • • • •						
					••••••	
		• • • • • • • • • • • • • • • • • • • •			• • • • • • • • • • • • • • • • • • • •	•••••
	• • • • • • • • • • • • • • • • • • • •					
	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •			
	••••					
	••••••					
• • • • • • • • • • • • • • • • • • • •					• • • • • • • • • • • • • • • • • • • •	
	•••••					• • • • • • • • • • • • • • • • • • • •
	• • • • • • • • • • • • • • • • • • • •					
						•••••

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No. 1545-0047

2008

Open to Public

Name of the organization

Employer identification number

M۵	rcy-USA For Aid & Development, Inc		38-2846307
Par		nds or Other Similar Funds or Part IV, line 6.	
	, and original and	(a) Donor advised funds	(b) Funds and other accounts
4	Total number at end of year		
	Aggregate contributions to (during year)		
	Aggregate grants from (during year) Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing that	t the assets held in donor advised	
	funds are the organization's property, subject to the organization's exc		☐ Yes ☐ No
	Did the organization inform all grantees, donors, and donor advisors in		<u> </u>
	used only for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?	, donor daries, si sins.	Yes No
	T.II. Conservation Easements. Complete if the org	anization answered "Yes" to Fo	
	Purpose(s) of conservation easements held by the organization (check		
•	Preservation of land for public use (e.g., recreation or pleasure)	Preservation of an historically in	moortant land area
	Protection of natural habitat	Preservation of certified historic	
	H	Treservation of contined material	o otraotare
	Preservation of open space	contribution in the form of a consequation	un escement
2	Complete lines 2a–2d if the organization held a qualified conservation on the last day of the tax year.	Contribution in the form of a conservation	in casement
	of the last day of the tax year.		Held at the End of the Yea
	- 4		
a	Total number of conservation easements		• • • • • • • • • • • • • • • • • • • •
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic structure inc	100	2c 2d
d	Number of conservation easements included in (c) acquired after 8/17		
3	Number of conservation easements modified, transferred, released, e	xtinguished, or terminated by the organia	zation during
	the taxable year		
4	Number of states where property subject to conservation easement is		
5	Does the organization have a written policy regarding the periodic mo	nitoring, inspection, violations, and	П., П.,
			Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforce	_	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing		_
8	Does each conservation easement reported on line 2(d) above satisfy	•	П., П.,
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports conservation easer		
	balance sheet, and include, if applicable, the text of the footnote to the	e organization's financial statements tha	t describes
	the organization's accounting for conservation easements.		<u> </u>
	organizations Maintaining Collections of Art Complete if the organization answered "Yes" to		er Similar Assets.
	Complete if the organization answered Tes t	o Form 990, Fart IV, line 6.	
	W		
та	If the organization elected, as permitted under SFAS 116, not to repo		
	art, historical treasures, or other similar assets held for public exhibition		e of public service,
	provide, in Part XIV, the text of the footnote to its financial statements	that describes these items.	
h	If the organization elected, as normitted under SEAS 116, to report in	its rayanus statement and belongs show	at warks of art
D	If the organization elected, as permitted under SFAS 116, to report in		
	historical treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of p	public service,
	provide the following amounts relating to these items:		.
	(i) Revenues included in Form 990, Part VIII, line 1		
_	(ii) Assets included in Form 990, Part X		····· • \$
2	If the organization received or held works of art, historical treasures, of		provide the
	following amounts required to be reported under SFAS 116 relating to		
а	Revenues included in Form 990, Part VIII, line 1		• \$
b	Assets included in Form 990, Part X		> \$

che	dule D (Form 990) 2008 Mercy-USA									age 2
Pa	rt III Organizations Maintaining C	Collections of Art,	Historical Treas	sures, c	or Other	Simila	r Asse	ts (contin	ued)	
3	Using the organization's accession and other reitems (check all that apply):	cords, check any of the	following that are a	significan	t use of its	collection	on			
а	Public exhibition	d 🗌 Loan o	or exchange program	ns						
b	Scholarly research	e Other	oxonango program							
c	Preservation for future generations	o E outor								
4	Provide a description of the organization's colle Part XIV.	ctions and explain how t	hey further the orga	nization's	exempt pu	ırpose in	1			
5	During the year, did the organization solicit or reassets to be sold to raise funds rather than to b	e maintained as part of	the organization's co	ollection?				Yes		No_
Pa	rt IV Trust, Escrow and Custodia Part IV, line 9, or reported an				n answer	ed "Ye	s" to F	orm 990,		
1a	Is the organization an agent, trustee, custodian				s not					
	-						ſ	Yes	\Box	No
b	If "Yes," explain the arrangement in Part XIV an	d complete the following	ı table:				• • • • • •	_		
	•	,	,			Г		Amoun	t	
С	Beginning balance						1c			_
	Additions during the year					· · · · 🛏	1d			
e	Distributions during the year					···· -	1e			_
f	Ending balance				• • • • • • • • • • •	····	1f			_
2a	Did the organization include an amount on Forr	n 990 Part X line 212			• • • • • • • • • • •	∟		Yes	П.	— No
b	If "Yes," explain the arrangement in Part XIV.						L	162	L! '	NO
	rt V Endowment Funds. Comple	te if organization a	nswered "Yes" 1	to Form	990 Pa	art IV I	ine 10			
		(a) Current year	(b) Prior year	 	years back	·		ack (e) Fou	r vears !	hack
1a	Beginning of year balance	*	(-//	(0)	,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2011 (0) 1 00	. ,00.0	Second Se
	Contributions									
	Investment earnings or losses									
q	Grants or scholarships									
	Other expenditures for facilities									
٠	•									
	and programs									
	Administrative expenses									
g 2	• • • • • • • • • • • • • • • • • • • •	nd beleves beld see								<u> </u>
	Provide the estimated percentage of the year e									
	Board designated or quasi-endowment	[%]								
	Permanent endowment %									
	Term endowment ▶%									
Ja	Are there endowment funds not in the possess	ion of the organization tr	nat are held and adn	ninistered	for the			1	[
	organization by:							<u> </u>	Yes	<u>No</u>
	(i) unrelated organizations							3a(i)		
_	(ii) related organizations	· · · · · · · · · · · · · · · · · · ·						3a(ii)		
	If "Yes" to 3a(ii), are the related organizations li							<u>3b</u>		
	Describe in Part XIV the intended uses of the or art VI Investments—Land, Buildin			0 D	V II 4					
	Investments—Land, Buildin Description of investment	(a) Cost or other basis								
	Description of investment	(investment)	(b) Cost or ot basis (other	1	(c) De	preciation	1	(d) Book	value	
	Land	(investment)	Dasis (Ulife)	''	000000000000000000000000000000000000000		**********			
1a	Land									
Q.	Buildings							•		
	Leasehold improvements							·· ·		
	Equipment		100	764		1 4 6			4.0	
	Other I. Add lines 1a–1e. (Column (d) should equal Fo	rm 990 Part V column		,764		146,	0/8		46,0	
	, ia— io. tociuliii tu, silvulu Euual Fu	iiii 330. Fail A. COluliili	DI. IIIIE (U(C).)				-			חחח

Part VII Investments—Other Securities. See Form 990		11C 38-2846307 Page 3
(a) Description of security or category	(b) Book value	(c) Method of valuation:
(including name of security)	(b) book value	Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12.)		
Part VIII Investments—Program Related. See Form 990), Part X, line 13.	
(a) Description of investment type	(b) Book value	(c) Method of valuation:
		Cost or end-of-year market value
	 - 	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 13.)		
Part IX Other Assets. See Form 990, Part X, line 15.		
(a) Description		(b) Book value
	· · · · · · · · · · · · · · · · · · ·	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 15.)		•
Part X Other Liabilities. See Form 990, Part X, line 25).	
(a) Description of liability	(b) Amount	
Federal income taxes		
		_
	 	_
		4
		\dashv
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		\dashv
		1
Total. (Column (b) should equal Form 990, Part X, col. (B) line 25.)		
In Part XIV, provide the text of the footnote to the organization's financial state	ements that reports the	organization's liability for
uncertain tax positions under FIN 48.	•	•

ents With F	Statements Revenue per Re	1 2 3 4 5 6 7 8 9 10 esturn	4,966,441 4,783,724 182,717 -121,691 -121,691 61,026 4,966,441
ents With F	Revenue per Re	2 3 4 5 6 7 8 9 10	4,783,724 182,717 -121,691 -121,691 61,026
ents With F	Revenue per Re	3 4 5 6 7 8 9 10	-121,691 -121,691 61,026
ents With F	Revenue per Re	4 5 6 7 8 9 10	-121,691 -121,691 61,026
ents With F	Revenue per Re	5 6 7 8 9 10	-121,691 61,026
ents With F	Revenue per Re	6 7 8 9 10	-121,691 61,026
ents With F	Revenue per Re	7 8 9 10	-121,691 61,026
ents With F	Revenue per Re	8 9 10 eturn	-121,691 61,026
ents With F	Revenue per Re	9 10 eturn	-121,691 61,026
ents With F	Revenue per Re	10 eturn	61,026
2a 2b 2c 2d	Revenue per Re	eturn	
2a 2b 2c 2d			4,966,441
2a 2b 2c 2d		1	4,966,441
2b 2c 2d			
2b 2c 2d			
2c 2d			
2d		-	
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		2e	4 000 441
		3	4,966,441
4a		_	
4b		_	
		4c	
		5	4,966,441
ments With	Expenses per	Return	
		1	4,905,415
2a		_	
2b		_	
2c		_	
2d	121,69	1	
		2e	121,691
		3	4,783,724
4a		_	
4b		_	
		4c	
		5	4,783,724
4a 4b			4c
2d and 4b. sO<u>t</u>h e	er		
	4a	4a	4a 4b 4c 5

Schedule D (Fo	orm 990) 20	08 M	ercy	y-US	A F	or	Aic	<u> 8</u>	De	ve]	Lop	men	t,	Inc	3 3	38 <u>-</u>	284	63	<u>07</u>					Pa	age 5
Part XIV	Suppler	nental	Infor	matio	n (cor	ntinue	d)																		
		<u>.</u>																							
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Schedule F (Form 990)

Part I

Statement of Activities Outside the United States

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Mercy-USA For Aid & Development, Inc

Employer identification number 38-2846307 General Information on Activities Outside the United States. Complete if the organization answered

	"Yes" to Form 99	90, Part IV, line 14	b.	o o mproto mano organization an	Swered
1 For gran			ords to substantiate the amount of the	e grants or	
assistand	ce, the grantees' eligib	ility for the grants or as:	sistance, and the selection criteria us	ed to award	
the grant	s or assistance?				X Yes No
	tmakers. Describe in l		's procedures for monitoring the use		
3 Activities	per Region. (Use Sch	edule F-1 (Form 990) if	additional space is needed.)		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
	& Kenya 2	170	Program Services	Health, Food, Shelter,	3,523,877
Albania	1	. 2	Program Services	Economic Dev., Educat	135,332
Bosnia Lebanon	1	. 5	Program Services	Economic Dev., Food	185,789
Indonesi	1	. 3	Program Services	Health, Education, Etc	144,451
Yemen	1	. 2	Program Services	Education, Econo. Dev.	117,174
Pakistar	1	2	Program Services	Food, Shelter	85,146
		1	Program Services	Education	220,603
Banglade	sh	1	Program Services	Food, Shelter	78,421
India 		1		Food, Shelter	
				1994,5462662	16,624
					,
Totals >	6	187			4,507,417

Page 2

Schedule F (Form 990) 2008	Mercy-USA For Aid		& Development, Inc 38-2846307	38-2846307				Page 2
Part II Grants and Part IV, line	Grants and Other Assistance to Organizations or Part IV, line 15, for any recipient who received more	ipient who rece	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990 Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000.	United States. Ck this box if no on	complete if the cerecipient rec	organization ans eived more than	wered "Yes" to \$5,000	Form 990,
Ose oche	ane r-1 (rolling	an) II auuillolla	USE OCHECINE T-1 (TOITH 990) II AUGINOHAI SPACE IS HEGGES.		(f) Manner of	(a) Amount of	(h) Description	(i) Method of
1 (a) Name of organization	(b) IRS code section	(c) Region	(d) Purpose of	(e) Amount of	cash cash	non-cash	of non-cash	valuation
	and EIN (if applicable)		grant	cash grant	disbursement	assistance	assistance	(book, FMV, appraisal, other)
		South Asia	Food and Sheltor	55,982	Cash			
			Food and Sheltor	15,000	Cash			
2 Enter total number of or	ganizations that are re	ecognized as chari	Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has	the grantee or counse	l has		,	

Enter total number of other organizations or entities provided a section 501(c)(3) equivalency letter

8

Schedule F-1 (Form 990) 2008

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Page 3

Schedule F (Form 990) 2008 Mercy-USA For Aid & Development, Inc 38-2846307

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Use Schedule F-1 (Form 990) if additional space is needed.

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(h) Method of valuation	(book, FMV, appraisal, other)										Schedule F (Form 990) 2008
(g) Description of non-cash	assistance										Schedule
(f) Amount of	assistance										
(e) Manner of	disbursement										
(d) Amount of	cash grant										
	(c) Number of recipients										
	(b) Region										
	(a) Type of grant or assistance										

Schedule F (Form 990) 2008 Mercy-USA For Aid & Development, Inc 38-2846307	Page 4
Part IV Supplemental Information Complete this part to provide the information required in Part I, line 2, and any other addition	
Part I, Line 2 - Procedures for Monitoring the Use of Grant Fund	
Organizations outside of the US:	
Grantees based outside of the US and US-based grantees receiving	funding
for projects outside of the US must be registered non-profit org	ganizations
with their respective national governments. They are checked ag	gainst the
US Treasury Department, US State Department and United Nations 1	ists of
designated terrorists. They are also required to certify that the	ney do not
advocate, support or fund terrorist activities and that all fund	ls received
from Mercy-USA will be used strictly for humanitarian purposes.	They are
further required to submit their independently audited annual f	inancial
statements. Specific agreements are signed for each grant; the	3 e
agreements contain further certifications, stipulate reporting	
and limit use of funds to the specific project funded.	
Grant payments are paid in installments after receiving and app	roving
narrative and financial reports. Reports include pictures of t	ne funded
activities and beneficiaries. They also include copies of all	expense
receipts and invoices. Expenses must be supported by specific	
documentation in order to be accepted and the grant funds paid.	Monitoring
may also involve site visits where feasible.	
Part IV - Additional Information	
For Grants to Organizations outside of the USA both recipients	

registered with their respective National Governments.

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SCHEDULE 1

(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

OMB No. 1545-0047 2008

> ► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. ► Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service	`			► Attach to Form 990.	90.			Inspection	
	Mercy-USA For Aid & Developm	£ Develor	nent, Inc	nc		Employer identification 38-2846307	Employer identification number 38–2846307	ber .	I
Part I General Info	General Information on Grants and Assistance	Assistance							
1 Does the organization ma the selection criteria used 2 Describe in part IV the ord	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Darf IV the organization's procedures for monitoring the use of grant finds in the United States.	he amount of the grant of the grant of the grant of the use of the	rants or ass	sistance, the grantees'	eligibility for the grants	or assistance, and		X Yes	0
=	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	vernments an ecipient that re	d Organ ceived π pace is r	zations in the Ur lore than \$5,000. needed	Organizations in the United States. Complete if the organization answered "Yes" on sived more than \$5,000. Check this box if no one recipient received more than \$5,000 ace is needed	plete if the org	anization ansv nt received mo	vered "Yes" on ore than \$5,000. Use ▶	
1 (a) Name and addr	(a) Name and address of organization	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(d) Amount of cash grant (e) Amount of non-cash (book, FMV, appraisal, assistance other)	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
Humanity Hope Org. Inc. 8146 9th Avenue Port Arthur	Inc.	20-3428167	m	198,925		Book		Education-School Con	ជ
Islamic Shura Council of M 1830 West Square Lake Road Bloomfield Hills	cil of Michigan ake Road MT 48302	32-0157488	က	12,000		Book		Food,	
									l
									I
									1
2 Enter total number of sect	Enter total number of section 501(c)(3) and government organizations	organizations						2 2	

Page 2

SCHEDULE M (Form 990)

NonCash Contributions

► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No. 1545-0047

2008

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Mercy-USA For Aid & Development, Inc

Employer identification number 38-2846307

Pa	rt I Types of Property									
		(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g		Method of	d) determining enues			
1	Art—Works of art									
2	Art—Historical treasures									
	Art—Fractional interests									
4	Books and publications									
5	Clothing and household									
	goods									
6	Cars and other vehicles									
7	Boats and planes									
8	Intellectual property									
9	Securities—Publicly traded									
10	Securities—Closely held stock									
11	Securities—Partnership, LLC,									
	or trust interests									
12	Securities—Miscellaneous									
13	Qualified conservation									
	contribution (historic									
	structures)									
14	Qualified conservation									
	contribution (other)									
15	Real estate—Residential									
16	Real estate—Commercial									
17	Real estate—Other						***************************************			
18	Collectibles									
19	Food inventory	X	1	475,861	Fair	Market	Value	,		
20	Drugs and medical supplies	X	1	1,530,751	Fair	Market	value			
21	Taxidermy									
22	Historical artifacts									
23	Scientific specimens									
24	Archeological artifacts									
25	Other ►(
26	Other ►(
27	Other ►(
28	Other ►()								
29	Number of Forms 8283 received by	the organ	ization during the tax yea	ar for contributions for						
	which the organization completed F	orm 8283	Part IV, Donee Acknow	edgement	29					
									Yes	No
30a	During the year, did the organizatio	n receive l	by contribution any prope	rty reported in Part I, lines	1-28 that					
	it must hold for at least three years									
	used for exempt purposes for the e	ntire holdir	ng period?					30a		X
b	If "Yes," describe the arrangement	in Part II.								
31	Does the organization have a gift a	cceptance	policy that requires the i	eview of any non-standard						
	contributions?							31	X	
32a		nird parties	or related organizations	to solicit, process, or sell r	non-cash		, , ,			
	contributions?							32a		X
b	If "Yes," describe in Part II.									
33	If the organization did not report rev	enues in o	column (c) for a type of p	roperty for which column (a	a) is checke	d,				
	describe in Part II.									

Schedule M (Form 990) 2008 Mercy-USA For Aid & Development, Inc 38-2846307 Pag	je 2
Schedule M (Form 990) 2008 Mercy-USA For Aid & Development, Inc 38-2846307 Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.	
	•••
	••••
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	,

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047
2008
Open to Public

Name of the organization

Mercy-USA For Aid & Development, Inc

Employer identification number 38-2846307

Amended Return Explanation
At the time or original Filing Schedule F page 2 was not completed.

Form 990, Part III, Line 4d - All Other Achievements
Economic Vitalization:
······································
The provision of ways for needy individuals and their
communities to sustain themselves and to improve their
quality of life; and assistance in reviving the economies
of communities devastated by natural and man-made
disasters.
General Program:
General program includes all ancillary program services
needed to maintain and enhance the specific program
sectors.
Form 990 Part V Line 4b - Financial Accounts in Foreign Countries
Form 990, Part V, Line 4b - Financial Accounts in Foreign Countries Albania, Bosnia-Herzegovina, Kenya, Indonesia, Lebanon
Form 990, Part VI, Line 10 - Organization's Process Used to Review Form 990
The Form 990 is prepared after the completion of the annual independent
audit by the auditors. After it is reviewed by the senior management, the
CEO and the CFO present this Form 990 to the Board of Directors for their

Schedule O (Form 990) 2008 Name of the organization Employer identification number Mercy-USA For Aid & Development, Inc 38-2846307 review and final approval before it is submitted to the IRS. Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy Board Members and all the Employees are required to disclose any potential conflict of interest. Depending on the nature of the potential conflict, the person may have to resign from the Organization, or, at the very least, is precluded from any discussions or voting related to that matter. Form 990, Part VI, Line 15a - Compensation Process for Top Official Form 990, Part VI, Line 15b - Compensation Process for Officers The board of directors, which is solely composed of volunteers, reviews and approves the Compensation of Organization's CEO and CFO by comparing salaries paid by similar organizations. This review is further facilitated by using Guidestar's or a similar annual Compensation Report, which analyzes compensation reported by all non profit entities in their recent Form 990 filings and breaks it down by type, size of the organization, regional location, etc. The Board's decision is recorded in the minutes of that relevant meeting. Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Recent independent audited financial statements and the Form 990 are available on the organization's website. Form 1023, the Articles of Incorporation and Conflict of Interest Policy are available upon request.

Reasonable copying and postage fees may be charged for these.

Forms 990-PF	Other Notes and Loans Receivable					
	For calendar year 2008, or tax year beginning	, and ending		2008		
Name		_	Employer Ider	ntification Num		
Mercy-USA For	Aid & Development, Inc		38-2846	307		

			For ca	alendar year 2008,	or tax year beginning	<u></u>	, and ending		
Name						-		Employer I	dentification Number
Mercy	v-USA	For Z	Aid	& Develo	oment, Inc			30_30	46207
	, 0011	101 1		u Develo	omenc, inc			38-28	46307
_Form	990,	Part	X,	<u>Line 7 -</u>	Additional	<u> Informatio</u>	n		
		Nam	ne of h	oorrower			Deletie seht 4 - P		
(1) No 1	tes Re	eceiva	able	<u>a</u>			Relationship to dis	qualified per	son
(2)									
(3)									
(4)		_							
(5)									
(6)									
<u>(7)</u>									
(8)									
(9) (10)			-		<u> </u>				
(10)									
	Original a				Maturity				Interest
(1)	borrowe	<u>ed</u>		Date of loan	date	R	epayment terms		rate
<u>(1)</u> (2)			_						
(3)			+						
(4)			+-						
(5)			_						
(6)									
(7)									
(8)							······································		
(9)									-
(10)									
(1)		Security	provi	ded by borrower			Purpose o	f loan	<u> </u>
(1) (2)		 -							
(3)								 -	·
(4)									
(5)							 	· , ,,,,,	
(6)									
(7)									
(8)									
(9)									
(10)		100000000000000000000000000000000000000							
	Cor	nsideration	furnis	hed by lender		Balance due at beginning of year	Balance due a end of year	t F	Fair market value (990-PF only)
(1)						10,380	4.	000	(990-FF Offiy)
(2)									
(3)									

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year	Fair market value (990-PF only)
1)	10,380	4,000	\
(2)			·
3)			
4)			······································
5)			
3)			
7)			
3)			
9)			
10)			
Totals	10,380	4,000	

7052 Mercy-USA For Aid & Development,Inc 38-2846307 Federal Statements

11/12/2009 12:42 PM

FYE: 12/31/2008

Form 990 - Federal General Footnote

Description

Form 990 Part IX- Line 24f			
Expense	Program	Management	Fundraising
	Services	& General	Expenses
1-Dues, Subscriptions, Fees, Etc	\$ 0	\$ 3,599	\$ 0
2-Postage & Shipping	\$ 9,090	\$ 8,114	\$ 11,878
3-Printing & Copying	\$ 1,584	\$ 3,208	\$ 7,542
4-Loss on Sale of Assets	\$ 788	\$ 0	\$ 0
TOTAL	\$ 11,462	\$ 14,921	\$ 19,420