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990 Form

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.

2011 Open to Public Inspection

A	For the 2011	calendar year, or tax year beginning , and ending	reporting requir	ements.	Inspection
	Check if applicable:	C Name of organization		D Emp	1000-14-17
	Address change	Mercy-USA For Aid & Development, Inc		O Emp	loyer identification number
	Name change	Doing Business As		٠,	004600
$\overline{\Box}$	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite		-2846307
		44450 Pinetree Drive	201		
LJ	Terminated	City or town, state or country, and ZIP + 4	201	/3	4-454-0011
	Amended return	Plymouth MI 481703869		_	
	Application pending	F Name and address of principal officer:		G Gross red	peipts \$ 7,090,907
	Tax-exempt status: Website: ▶ •	roup return for affiliates? Yes No filiates included? Yes No o," attach a list. (see instructions)  emption number			
2000000	Form of organization	71330Clation Other	ear of formation: 1		M State of legal domicile: MI
		Ammary escribe the organization's mission or most significant activities:			The Country of the Co
& Governance	self 2 Check th	viduals and their Communities in their own efforts to sufficient.  is box   if the organization discontinued its operations or disposed of more than 25% of voting members of the reportion bed (Park Marie 1998).	d supporti	ng ore	
es	4 Number	of independent voting members of the governing body (Part VI, line 1b)		4	7
Activities	5 Total nur	nber of individuals employed in calendar year 2011 (Part V, line 2a)		5	4
Act	6 Total nur	nber of volunteers (estimate if necessary)			20
•		elated business revenue from Part VIII, column (C), line 12			0
	<b>b</b> Net unre	ated business taxable income from Form 990-T, line 34	7b		
	ŀ		Prior Year		Current Year
ē		ions and grants (Part VIII, line 1h)	7,000	,384	7,062,699
E E	9 Program	service revenue (Part VIII, line 2g)		0	0
Revenue	10 Investme	nt income (Part VIII, column (A), lines 3, 4, and 7d)	10	,227	5,667
_	11 Other rev	renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3	,423	22,541
	12 lotal rev	enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,014	,034	7,090,907
		nd similar amounts paid (Part IX, column (A), lines 1–3)	652	,738	608,915
	14 Benefits	paid to or for members (Part IX, column (A), line 4)		0	0
es	15 Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,281	,386	1,464,809
penses	16a Professio	other compensation, employee benefits (Part IX, column (A), lines 5–10)  nal fundraising fees (Part IX, column (A), line 11e)  draising expenses (Part IX, column (D), line 25) ▶ 207,836		0	0
Exp	<b>b</b> Total fund	draising expenses (Part IX, column (D), line 25) ▶ 207,836			
ш	17 Other exp	penses (Part IX, column (A), lines 11a–11d, 11f–24e)	4,913	,144	4,820,627
		enses. Add lines 13–17 (must equal Part IX, column (A), line 25)	6,847	,268	6,894,351
&	19 Revenue	less expenses. Subtract line 18 from line 12		,766	196,556
Net Assets or Fund Balances	20 Total ass	ets (Part X, line 16)	Beginning of Curre		End of Year
Asse Bala	20 Total liab	Sition (Part V. Bra 200)	3,985		4,597,129
Net	22 Net asse	is or fund balances. Subtract line 21 from line 20		,557	740,431
255660000	****************	gnature Block	3,660	,142	3,856,698
		perjury, I declare that I have examined this return, including accompanying schedules and statements,			
tru	ue, correct, and co	mplete. Declaration of preparer (other than officer) is based on all information of which preparer has a	and to the best of t ny knowledge.	my knowie	age and belief, it is
		Margaret - Can.		10/	8/20/2
Sig	ın 🖊 🖥	ignature of officer		Date	8/20/2
Hei		Umar al-Qadi A Presid	lent & CI	eO.	
_	-	ype or print name and title			
	Print/Typ	e preparer's name Preparer's signature	Date	Check	# PTIN
	i Anil S	akhuja ( )	10/08/	12 self-em	L ~ 1
Pre	parer Firm's na	me > Alan C. Young & Associates, P.C.		m's EIN ▶	38-2463166
Use	Only	7310 Woodward Ave Ste 740		0 1	20 2100100
	Firm's ad	m 1 11 10m 40000	Ph	one no.	313-873-7500
		s this return with the preparer shown above? (see instructions)	1,111		X Yes No
For	Paperwork Re	duction Act Notice, see the separate instructions.			Form <b>990</b> (2011)

Part III Statement of Program Service Accomplishment, Inc. 38-2846307	D 9
Statement of Program Service Accomplishments	Page 2
Check if Schedule O contains a response to any question in this Part III	<b>X</b>
Briefly describe the organization's mission:  Mercy-USA is dedicated to alleviating human suffering and supporting individuals and their Communities in their own efforts to become more self-sufficient.	
2 Did the organization undertake any significant program services during the year which were not listed on the	<del> </del>
Drior Form 990 or 990-F7?	X No
services?	X No
If "Yes," describe these changes on Schedule O.  Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a (Code: )(Expenses \$ 5,278,161 including grants of \$ 294,951 )(Revenue \$ Health Services - The improvement of individual and community health through education, immunization, nutrition support, safe water, hygiene, sanitation and other preventative measures. It also includes the operation or funding of clinics, hospitals, and other health care institutions; improvement, rehabilitation and renovation of the existing health care infrastructure; and the provision of medicines, medical supplies and medical equipment to health care facilities.	on
······	
4b (Code: )(Expenses \$ 574,452 including grants of \$ 92,725 ) (Revenue \$ Food, Shelter & Orphan Assistance - The provision of all types of food and shelter, winterization materials, and necessary household and personal items. The orphan assistance includes specific projects or other assistance for orphans around the world.	1
4c (Code: )(Expenses \$ 446,626 including grants of \$ 221,239 ) (Revenue \$ Education - The improvement of attendance and academic performance, especially among girls, through daily school lunch programs. It also includes construction of school buildings, as well as repairs and renovations to existing schools. Additionally, the provision of vocations and technical training especially to orphans and other vulnerable children and youth.	11
4d Other program services. (Describe in Schedule O.)  (Expenses \$ 265,929 including grants of \$ ) (Revenue \$ )	
4e Total program service expenses ▶ 6,565,168	

Part IV **Checklist of Required Schedules** 

	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	_	Yes	No
		1	X	<u>L</u> .
3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
-	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			
4	Section 501(a)(3) organizations Distributions Distribution	3		X
•	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		x
•	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,			
6	***************************************	5		X
٠	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			
7		6		X
•	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
٠	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III			
9		8		X
•	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part  Y: or provide credit courseling debt account of the courseling debt account			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	İ		
10	***************************************	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
11	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
.,	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
_	VII, VIII, IX, or X as applicable.			
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	X	
	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		X
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		<u> </u>
d	3 me to that is 5% of thore of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u> </u>
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	X	
þ	was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
40	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		_ <u>x</u> _
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 United States?	14a	X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,		1	
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
4=	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
4.0	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
17	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
10	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<u> </u>
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		<u> </u>
_	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			7.5
20a	If "Yes," complete Schedule G, Part III	19		<u> </u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
_~	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	i	

Part IV Checklist of Required Schedules (continued)

24	Did the organization report more than \$5,000 of grants and other assistance to any government or organization		Yes	No
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			
22	Did the organization report more than \$5,000 of groups and all and II	21	X	
	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III			
23	Did the organization answer "Voc" to Bort VII. Confirm A. II. D. d. 1	22		X
	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	ļ		
24a	employees? If "Yes," complete Schedule J	23		х
270	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			
	ulrough 24d and complete Schedule K, If "No." go to line 25	24a		x
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		_=
С	and a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c	į	
d 25-	bid the organization act as an on behalf of issuer for bonds outstanding at any time during the year?	24d		
25a	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	25a		X
þ	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-F7?	1 1		
	If "Yes," complete Schedule L, Part I	25b	l	x
26	was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L. Part II	26	i	x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee.			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled		İ	
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	00000000	X
$\smile$	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	204	-	
	Schedule L, Part IV	28b		x
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	205		
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		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	29	^	
	conservation contributions? If "Yes," complete Schedule M	30	- 1	x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	24	1	x
32	Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		
	complete Cahadula N. Dart II	32		v
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		<u>X</u>
	anations 204 7704 0 and 204 7704 00 15%/ Building and Anaton and A	20	ı	v
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	33		<u>x</u>
	N/ and N/ Page 4	1		v
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	35a		
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	OF.		v
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b	-+	<u>X</u>
				v
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36	$\dashv$	<u> </u>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,		1	
	D-47/I			v
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	37	$\dashv$	<u> </u>
	19? <b>Note.</b> All Form 990 filers are required to complete Schedule O		<b>.</b>	
-		38	X	

Form 990 (2011) Mercy-USA For Aid & Development, Inc 38-2846307

Part V Statements Regarding Other IRS Filings and Tax Compliance

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Page	:

Check if Schedule O contains a response to any question in this Part V X Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable No 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? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 1c Statements, filed for the calendar year ending with or within the year covered by this return \_\_\_\_\_ If at least one is reported on line 2a, did the organization file all required federal employment tax returns? b X Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O X 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 If "Yes," enter the name of the foreign country: ► See Schedule O See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 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? X If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? g 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? h 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? 9a Did the organization make a distribution to a donor, donor advisor, or related person? b 9b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 а 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities b 11 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts.ls the organization filing Form 990 in lieu of Form 1041? 12a þ 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 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. 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 c Enter the amount of reserves on hand **14a** Did the organization receive any payments for indoor tanning services during the tax year? 14a X If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

For	m 000 (2011). <b>Mongre TIGN</b> T					
P	m 990 (2011) Mercy-USA For Aid & Development, Inc 38-2846307					Page (
	Governance, Management, and Disclosure For each "Yes" response to lines 2 the "No" response to line 8a, 8b, or 10b below, describe the circumstances.	ough	7b below	, and f	or a	
	"No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, on See instructions. Check if Schedule O contains a response to any question in this circumstances.			Schedu	le	
نب	ction A. Governing Body and Management	Part	<u>VI</u>	<u> </u>		X
					Yes	No
1a	the governing body at the end of the fax year	1a	7		1 63	NO
	if there are material differences in voting rights among members of the governing body, or			-		
	if the governing body delegated broad authority to an executive committee or similar					
b	committee, explain in Schedule O.					
2	Enter the number of voting members included in line 1a, above, who are independent	1b	7			
_	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?					
3	Did the organization delegate control over management of its			2		X
	Did the organization delegate control over management duties customarily performed by or under the direct					
4	supervision of officers, directors, or trustees, or key employees to a management company or other person?  Did the organization make any significant changes to its governing described to the person?			3		X
5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  Did the organization become aware during the year of a significant diversion of the organization's assets?			4		X_
6	Did the organization have members or stockholders?		· · · · · · · · · · · · · · · · · · ·	5_		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			6		X
	one or more members of the governing body?					
þ	Are any governance decisions of the organization reserved to (or subject to approval by) members	• • • • • •		7a	<u> </u>	<u> </u>
	stockholders, or persons other than the governing body?			7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by	the fo	llowina:	75		
a	The governing body?		g.	8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at					
•	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		x
ec	tion B. Policies (This Section B requests information about policies not required by the Interna	l Rev	enue Cod	ie.)		
,	Did the organization have local chapters, branches, or affiliates?				Yes	No
10	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			10a		_X_
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?					
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the		• • • • • • • • • • • • • • • • • • • •	10b	v	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	iorm?		11a	X	******
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to disclose annually dis	onflict		12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	orimot		12.0		
	describe in Schedule O how this was done			12c	x	
3	Did the organization have a written whistleblower policy?			13	х	
4	Did the organization have a written document retention and destruction policy?			14	х	
5	Did the process for determining compensation of the following persons include a review and approval by					
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official	, , ,		15a	Х	
b	Other officers or key employees of the organization			15b	Х	
o-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement					
b	with a taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			16a		X
U	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the					
	organization's exempt status with respect to such arrangements?			401		
ec	tion C. Disclosure		<del> </del>	16b		

## S

- 17 List the states with which a copy of this Form 990 is required to be filed  $\blacktriangleright$ CA, IL, MI, NJ
- Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
  - X Own website X Another's website X Upon request
  - Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the 44450 Pinetree Dr., Ste 201

Plymouth

MI 48170

Form 990 (2011)	Mercy-USA	For	Aid	&	Development, Inc	20 204620
				<u> </u>	DOVCHODINEILL, THE	38-2846307

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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Part VII **Independent Contractors** 

Check if Schedule O contains a response to any question in this Part VII

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the

- organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B) Average hours per week (describe	(d	o not x, uni	Pos check ess pe	osition ck more than one person is both an a director/trustee)			(D)  Reportable compensation from the	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
Ms. Iman ElKadi										
Chairperson	1.00	X		X				0	ol	0
(2) Mr. Hassan Amin										
Board Member	1.00	X						0	0	0
(3)Ms. Hoda Badr		l								
Board Member	1.00	X						0	0	0
(4)Dr. Ali El-Mensh								_		
V. Chairperson (5) Mr. Naushad Virj	1.00	X		X		┡		0	0	0
Treasurer		x		X						
(6) Mr. Melvin Bilal	1.00	<u> </u>		A		$\vdash$		0	0	0
Board Member	1.00	$ \mathbf{x} $						o		•
(7) Dr. Ahmad K.M. Els	hennawy	A				$\vdash$			0	0
Board Member	1.00	x						o	o	0
(8) Umar al-Qadi		-								
Pres./CEO	40.00			x				75,755	o	5,682
(9) Anas Alhaidar								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		3,002
CFO	40.00			x				72,478	o	1,800
(10)										
(11)										
(12)										
/43)										
(14)										

(25) c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)... Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address (C) Compensation 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ Form 990 (2011)

202	aı ı	otate	ment of Reve	nue	000000000000000000000000000000000000000							
<u> </u>							<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections		
41	3 1a	Federated ca		1a						512, 513, or 514		
وَي	į t	Membership of		1b								
ts,	1	Fundraising e	vents	1c			1					
15.5	i c	Related organ	nizations	1d			1					
S.E	e	Government grants		1e	1,	987,460	1					
Sign	1	All other contribution										
절		and similar amounts	s not included above	1f	5.	075,239						
E O	g	Noncash contribution	ı 1-1ans included in lines		5	744,324						
Contributions, Gifts, Grants and Other Similar Amounts	h		es 1a-1f				7,062,699					
-en					*********	Busn. Code	7,002,099					
Program Service Revenue	2a					Dusii. Code						
Re	Ь											
<u>i</u>	l c					·						
Š	d											
Ë	e								· · · · · · · · · · · · · · · · · · ·			
g	f	All other progr	am service revenu									
Pro			es 2a-2f			<b>&gt;</b>						
	3	Investment inc	ome (including di	vidond:	. interest							
		and attended to the second of										
	4						5,667			5,667		
	5											
	•											
	6-	Cross route	(i) Real		(II) P	ersonal						
	_	Gross rents		-+								
		b Less: rental exps.										
	С	Rental inc. or (loss)										
		d Net rental income or (loss). 7a Gross amount from (1) Securities (1)										
		sales of assets	(i) Securities		(ii)	Other						
		other than inventory										
	D	Less: cost or other										
		basis & sales exps.										
		Gain or (loss)										
			ss)		<u></u>	<u></u>						
nue	ва		om fundraising event	s								
ē		(not including \$	• • • • • • • • • • • • • • • • • • • •									
Ş.			eported on line 1c).									
Other Reve			18									
등			penses									
			(loss) from fundra		vents	<b>b</b>						
	9a		m gaming activities.									
		See Part IV, line	19	_ a_								
			penses									
			(loss) from gamin	g activi	ities	<b>&gt;</b>						
	10a	Gross sales of										
	_	returns and allo	owances	_ a								
			Less: cost of goods sold b									
ŀ	С	c Net income or (loss) from sales of inventory										
ŀ	4.4		cellaneous Revenue			Busn. Code		_				
	11a	Gain on F	oreign Currenc				22,541	22,541				
l	b	• • • • • • • • • • • • • • • • • • • •										
	C						-					
_	d	All other reven	ue		[					***************************************		
	е	otal. Add line	s 11a-11d			🟲	22,541					
	12	Total revenue	. See instructions			▶	7,090,907	22,541	ol	5,667		

Statement of Functional Expenses

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

	Check if Schedule O contains a respons	e to any question in this Par	tIX		
D	o not include amounts reported on lines 6b,	(A)	(B)	(C)	
_7Ł	o, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and	<b>(D)</b> Fundraising
1	and early debictance to governments and		- SAPERIOUS	general expenses	expenses
	organizations in the U.S. See Part IV, line 21	15,000	15,000		
2	Grants and other assistance to individuals in		237000		
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	593,915	593,915		
4	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)				
7	Other salaries and wages	1,360,447	1,288,166	53,150	19,131
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	99,513	75,793	23,720	
10 11	Payroll taxes	4,849	920	3,929	
	Fees for services (non-employees):	65 334			<del></del>
a b	Management	65,114	64,614		500
	Legal	6,022	4,985	1,037	
4	Accounting	14,300	10,877	3,423	
د د	Lobbying Professional fundraising services. See Part IV, line 17				
f					
, g	Other				
12	Other Advertising and promotion	146,049			
13	Off	97,892	90 041	4 605	146,049
14	Information technology	91,092	80,841	4,687	12,364
15	Royalties				
16	Royalties Occupancy	121,740	113,966	7,774	
17	Travel	124,952	123,249	1,703	
18	Payments of travel or entertainment expenses		123,213	1,703	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,834	315	2,519	
20	Interest			2/31/	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	20,561	18,746	1,815	
23	Insurance	1,483		1,483	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Program Materials	2,854,442	2,854,442		
b	Transportation Expenses	840,901	838,815	2,086	
C	Indirect Costs	337,492	337,492		
d	Bank Charges/Currency Flu	105,285	79,883	1,283	24,119
е	All other expenses	81,560	63,149	12,738	5,673
	Total functional expenses. Add lines 1 through 24e	6,894,351	6,565,168	121,347	207,836
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)				
DAA	Glowing GOT 30-2 (AGG 300-120)				Form <b>990</b> (2011)

(A) (B) Beginning of year End of year Cash—non-interest bearing 3,795,758 1 4,429,330 Savings and temporary cash investments 2 Pledges and grants receivable, net 3 3 Accounts receivable, net 128,246 81,067 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Notes and loans receivable, net 12,000 7 10,000 Inventories for sale or use 10,142 10,037 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 214,513 b Less: accumulated depreciation 10b 153,418 33,953 10c 61,095 Investments—publicly traded securities 11 Investments—other securities. See Part IV, line 11 12 12 Investments—program-related. See Part IV, line 11 13 13 Intangible assets 14 14 Other assets. See Part IV, line 11 15 5,600 15 5,600 Total assets. Add lines 1 through 15 (must equal line 34) ..... 16 **3,985,699** 4,597,129 16 17 Accounts payable and accrued expenses \_\_\_\_\_ 325,557 17 442,120 18 Grants payable 18 19 Deferred revenue 298,311 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 24 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 Total liabilities. Add lines 17 through 25 ... 325,557 26 740,431 Organizations that follow SFAS 117, check here X and complete Vet Assets or Fund Balances lines 27 through 29, and lines 33 and 34. Unrestricted net assets 2,599,933 3,856,698 27 Temporarily restricted net assets 28 1,060,209 28 Permanently restricted net assets Organizations that do not follow SFAS 117, check here and 29 complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 32 Total net assets or fund balances 3,660,142 3,856,698 33

4,597,129 Form 990 (2011)

3,985,699

Total liabilities and net assets/fund balances .....

For	m 990 (2011) Mercy-USA For Aid & Development, Inc 38-2846307		
P	art XI Reconciliation of Net Assets		Page <b>12</b>
	Check if Schedule O contains a response to any question in this Part XI		_
	Total revenue (must equal Part VIII, column (A), line 12)  Total expenses (must equal Part IX, column (A), line 25)	1 .	
_2	Total expenses (must equal Part IX, column (A), line 25)  Revenue less expenses. Subtract line 2 from line 1	. 1	7,090,907
3			6,894,351
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  Other changes in net assets or fund balances (a. I. i. i. a. i. i. a. i. i. i. a. i. i. a.  3	196,556	
5			3,660,142
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,	. 5	
	column (B))		
P:	art XII Financial Statements and Reporting	. 6	3,856,698
	Check if Schedule O contains a response to any question in this Part XII		
	general any quodion in this rate All		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		Yes No
	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?		
b	The office of garrization's finalicial statements audited by an independent accountant?		1 1 1
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	• • • • • • • • • • • • • • • • • • • •	
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c X
	If the organization changed either its oversight process or selection process during the tax year, explain in		20 A
	Schedule O.		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		
	issued on a separate basis, consolidated basis, or both:		
	X Separate basis Consolidated basis Both consolidated and separate basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		
	the Single Audit Act and OMB Circular A-133?		3a X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	• • • • • • • • • • • • • • • • • • • •	
-	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>	Зь Х
_			Form <b>990</b> (2011)

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

artment of the Treasury

nal Revenue Service

# **Public Charity Status and Public Support**

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

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

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization

Employer identification number Mercy-USA For Aid & Development, Inc 38-2846307 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).(Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).(Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi).(Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. **b** Type II c Type III–Functionally integrated Type III-Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (ii) FIN (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of organization in col. (i) listed in your (described on lines 1-9 the organization in organization in col. col. (i) of your (i) organized in the above or IRC section governing document? support? U.S.? (see instructions) Yes Yes Yes (A) (B) (C) (D) (E)

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

Schedule A (Form 990 or 990-EZ) 2011 Mercy-USA For Aid & Development, Inc 38-2846307

Part II Support Schedule for Organizations Described to Development, Inc 38-2846307

Page 2

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

ئب	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	<b>(6)</b> T. (-)
1	Gifts, grants, contributions, and membership fees received. (Do not				(4) 2010	(e) 2011	(f) Total
	include any "unusual grants.")	3,441,258	4,897,467	6,120,849	7,000,384	7 062 600	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf			3,220,022	7,000,364	7,062,699	28,522,657
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	3,441,258	4,897,467	6,120,849	7 000 001		
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)		7,20	0,120,849	7,000,384	7,062,699	28,522,657
6_	Public support. Subtract line 5 from line 4						28,522,657
	tion B. Total Support						20,322,637
	ndar year (or fiscal year beginning in)▶	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	3,441,258	4,897,467	6,120,849	7,000,384	7,062,699	28,522,657
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	51,006	53,591	34,714	10,227	5,667	155,205
ه _	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 IV.)	51,052	3,975	126	3,423	22,541	81,117
11	Total support. Add lines 7 through 10						28,758,979
12	Gross receipts from related activities, etc. (s				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	12	22,541
13	First five years. If the Form 990 is for the o	organization's first, s	second, third, fourtl	h, or fifth tax year a	s a section 501(c)(	3)	
	organization, check this box and stop here			<u></u>	<u></u>	<u></u>	▶ ☐
	tion C. Computation of Public Su	pport Percenta	ge				
14	Public support percentage for 2011 (line 6,	column (f) divided b	y line 11, column (	f))		14	99.18 %
15	Public support percentage from 2010 Sched	dule A, Part II, line 1	4			15	98.91 %
16a	33 1/3% support test—2011. If the organiz	zation did not check	the box on line 13	, and line 14 is 33	1/3% or more, chec	k this	<del></del> .
	box and stop here. The organization qualifi				,,,,		<b>▶</b> X
þ	33 1/3% support test—2010.If the organiz				s 33 1/3% or more,		
4	check this box and <b>stop here</b> . The organiza						▶ ∐
17a	10%-facts-and-circumstances test—201						
	10% or more, and if the organization meets						
	Part IV how the organization meets the "fac organization						<b>▶</b> □
b	10%-facts-and-circumstances test—201	0. If the organization	n did not check a b	ox on line 13, 16a,	16b, or 17a, and lir	ne	
	15 is 10% or more, and if the organization n						
	Explain in Part IV how the organization mee supported organization					-	▶ □
18	Private foundation. If the organization did	not check a box on	line 13, 16a, 16b,	17a, or 17b, check	this box and see		
	instructions						

Part III

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

	ction A. Public Support	quality under t	he tests listed I	pelow, please o	omplete Part II	.)	
Cale	endar year (or fiscal year beginning in)	(a) 2007	41,000				
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5			<del></del>			
7a							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
<u>~</u>	line 6.)						
	tion B. Total Support		T				
_	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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,						
14	First five years. If the Form 990 is for the o	arganization's first	cocond third fourt	or fifth towns and			<del></del>
•	organization, check this box and stop here					•	▶ □
Sec	tion C. Computation of Public Su		ae				
15	Public support percentage for 2011 (line 8,			f))		15	%
16	Public support percentage from 2010 Sche	dule A. Part III. line	15	·//	•••••	16	
Sec	tion D. Computation of Investmer	nt Income Perc	entage				
17	Investment income percentage for 2011 (lir	ne 10c, column (f) d	ivided by line 13, c	olumn (f))		17	%
18	Investment income percentage from 2010 S	Schedule A, Part III,	, line 17	(//		18	%
⁴9a	33 1/3% support tests—2011. If the organ	nization did not che	ck the box on line 1	4, and line 15 is m	ore than 33 1/3%, a	and line	
_	17 is not more than 33 1/3%, check this box	x and <b>stop here.</b> Ti	he organization qua	lifies as a publicly	supported organiza	ation	▶ □
b	33 1/3% support tests—2010. If the organ	nization did not ched	ck a box on line 14	or line 19a, and lin	e 16 is more than 3	3 1/3%, and	
	line 18 is not more than 33 1/3%, check this						▶ □
20	Private foundation. If the organization did	not check a box on	line 14 19a or 19	h check this how a	nd see instructions		▶ □

Part II, Line 10 - Other Income Detail  \$ 81,117	Page 4
\$ 81,117	
	• • • • • • • • • • • • • • • • • • • •
	•••••
	• • • • • • • • • • • • • • • • • • • •
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### SCHEDULE D (Form 990)

Department of the Treasury ternal Revenue Service

DAA

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. OMB No. 1545-0047

Schedule D (Form 990) 2011

Employer identification number

Open to Public

ne of the organization

► Attach to Form 990. ► See separate instructions.

Mercy-USA For Aid & Development, Inc 38-2846307 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year \_\_\_\_\_ Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements ..... 2b c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year **▶**\$ ..... Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of 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 \$ ..... If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X. For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Sch	edule D (Form 990) 2011 Mercy-USA	For Aid & D	evelopme	nt, Inc	38-2846	307		Page 7
3	Organizacions Manitallino	Collections of Art	Historical Tr	00011700	044 01 11		s (continue	Page 2
,	collection items (check all that apply):	n, and other records, che	ck any of the follo	wing that are	a significant use o	of its	<del>Voortunde</del>	<u>.u)</u>
a	Public exhibition	d 🗌 Loai	or exchange pro	varame				
b	Janoidily 1030dilon							
C	Preservation for future generations		<b>"</b>	• • • • • • • • • • • • • • • • • • • •				
4	Provide a description of the organization's colle	ections and explain how t	hey further the er			_		
	XIV.	Table and Oxpidin (104)	ney luither the or	ganization's	exempt purpose in	Part		
5	During the year, did the organization solicit or r	eceive donations of art b	daanda at aa .		_			
	assets to be sold to raise funds rather than to b	ne maintained as part of t	nstorical treasure	s, or other si	milar		r	
Pa	ert IV Escrow and Custodial Arra	ngements Comple	to if the error	collection?		<u></u>	Yes	No No
*********	Escrow and Custodial Arra line 9, or reported an amount	on Form 990 Part	rte ii the organ	ization an	swered "Yes" to	o Form 9	90, Part IV,	
1a	Is the organization an agent, trustee, custodian	or other intermediate for	<u> </u>				· · · · · · · · · · · · · · · · · · ·	
b	If "Yes," explain the arrangement in Part XIV ar	orlogomentate the fell of					Yes	No
	are an analysiment in all XIV al	id complete the following	table:					
C	Beginning balance						Amount	
						1c		
٠ ۵	Additions during the year					1d		
f	and your					1e		
	Enang balance					_1f		
2a h	Die trie organization include an amount on Form	n 990, Part X, line 21?					Yes	No
	The state and an angement in Fall XIV.							
##.##C	nt V Endowment Funds. Comple	te if the organization	n answered "Y	es" to For	m 990, Part IV,	line 10.		
4.	<u> </u>	(a) Current year	(b) Prior year	(c) Two ye	ears back (d) Ti	nree years bac	k (e) Four ye	ears back
1a	Beginning of year balance							
	Contributions							
С	Net investment earnings, gains, and							
	losses							
	Grants or scholarships							
_ e	Other expenditures for facilities and							
	programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the current	vear end balance (line 1	g, column (a)) he	ld as:			100000000000000000000000000000000000000	*************
а	Board designated or quasi-endowment ▶	%						
b	Permanent endowment ▶ %							
С	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2c should	equal 100%.						
3a	Are there endowment funds not in the possession	on of the organization tha	t are held and ad	ministered fo	r the			
	organization by:						TY.	es No
	(i) unrelated organizations							140
	(PP) I I I I I I I I I I I I I I I I I I							<del></del>
b	If "Yes" to 3a(ii), are the related organizations lis	sted as required on Sche	dule R?			• • • • • • • • • • • • • • • • • • • •	3b	_
4	Describe in Part XIV the intended uses of the or	ganization's endowment	funds		***************************************		[36]	
	rt VI Land, Buildings, and Equipr			10.				
	Description of property	(a) Cost or other basis	(b) Cost or o		(c) Accumulate	ed	(d) Book valu	ie.
		(investment)	(othe		depreciation		(a) Dook van	20
1a	Land							<del></del>
b	Buildings						<del></del>	
c	Leasehold improvements		<del></del>					
	Equipment		7	14,513	152	,418	61	,095
	Other		<del></del>	/	133	, 110	7	.,095
	Add lines 1a through 1e. (Column (d) must equal	al Form 990 Part X colu	mn (B) line 10(c)	1	L	•	£ 1	,095
		3 000, 1 0.1.71, 0010	(5), 10(0)	·/			01	., 095

Part VII	Investments Other Securities. See Form	1 990, Part X. line 12	Page :
	(a) Description of security or category	(b) Book value	43.40 m
	(including name of security)	(-) Sour raige	(c) Method of valuation:  Cost or end-of-year market value
	derivatives		oost of end-or-year market value
(0) 0	eld equity interests		
(3) Other			
(A)	•		
(B)			
···(ċ)	•		
(D)			
(E)			
(F)			
(G)			
(H)			
(I)	4)		
Part VIII	(b) must equal Form 990, Part X, col. (B) line 12.)	<b></b>	
e dit ven	Investments—Program Related. See Form	990, Part X, line 13.	
	(a) Description of investment type	(b) Book value	(c) Method of valuation:
(1)			Cost or end-of-year market value
(2)			
(3)			
4)			
(5)			
6)			
7)			
8)			
(9)			
)			
<u>∕</u>	(b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX	Other Assets. See Form 990, Part X, line 15.	<b>&gt;</b>	
	(a) Description		438
1)	(-)		(b) Book value
2)			
3)			
4)			
5)			
6)		······································	
7)			
8)			
9)			
0)			
otal. (Column	(b) must equal Form 990, Part X, col. (B) line 15.)		<b>&gt;</b>
Part X	Other Liabilities. See Form 990, Part X, line	25.	
	(a) Description of liability	(b) Book value	
	ncome taxes		
2)			
3)			
4)		-	
5)			_
6)			_
7)			_
8)			_
9)			_
<del></del>			_
1)	(b) must equal Form 990, Part X, col. (B) line 25.)		_

<sup>2.</sup> FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Sch	edule D (Form 990) 2011 Mercy-USA For Aid & Dev	elopment,Inc 38-	-2846307	Page <b>4</b>
1	recommended of Change III Net Assets from East	m 000 to Analta a Pro-		1 age 4
2	Total Total de (1 offi 990, Part VIII, Column (A) line 12)			7,090,907
_				6,894,351
<i>`</i> `				196,556
4	- 3 - 10 (10 00 00) OII III (10 00 00)		1 1	190,550
5			5	
6			6	
7	The period adjustments		1 _ 1 =	
8	Strict (Describe III Fall XIV.)		8	
9	The triangle of triangle of the triangle of the triangle of triangle of the triangle of tr		1 0 1	
10	Excess of (deficit) for the year per audited financial statements. Combine lin	es 3 and 9	40	106 FF6
Pa	Reconciliation of Revenue per Audited Financial	Statements With Payonus	nor Deturn	196,556
1	rotal revenue, gains, and other support per audited financial statements	The state of the s	1	7 000 007
2	7 mounts included on line 1 but not on Form 990, Part VIII, line 12.		·····	7,090,907
а	Net unrealized gains on investments	2a		
b	bonated services and use or racinties	26	<del></del>	
С	recoveres of prior year grants	20		
ď	Other (Describe in Part XIV.)	2d	<del></del>	
е	Add lines 2a through 2d Subtract line 2a from line 1			
3	Subtract line 2e from line 1	• • • • • • • • • • • • • • • • • • • •		7 000 000
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		3	7,090,907
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV.)	4a 4b	<del></del>	
С				
5	Add lines 4a and 4b  Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	· · · · · · · · · · · · · · · · · · ·		7 000 007
Pa	rt XIII Reconciliation of Expenses per Audited Financial	Statements With Expense	s per Beturn	7,090,907
1				6 004 351
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		· · · · · · · · · · · · · · · · · · ·	6,894,351
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c 2c	<del></del>	
	Other (Describe in Part XIV.)		<del></del>	
e	Add lines 2a through 2d			
3	Add lines 2a through 2d Subtract line 2e from line 1		2e	6 004 251
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		3	6,894,351
а	Investment expenses not included on Form 990, Part VIII, line 7b	4-		
		4a		
~	Other (Describe in Part XIV.) Add lines <b>4a</b> and <b>4b</b>			
	***************************************	•••••••••••••••••••••••••••••••••••••••		6 004 051
Ba	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1 rt XIV Supplemental Information	8.)	5	6,894,351
Comp	elete this part to provide the descriptions required for Part II, lines 3, 5, and 9;	Part III, lines 1a and 4; Part IV, lines	s 1b and 2b;	
	/, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, I	nes 2d and 4b. Also complete this	part to provide	
any a	dditional information.			
		•••••		
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Part XI	V Suppleme	mercy-us ental Information	n (continued)	& Develo	pment, Inc	38-2846307	Page <b>5</b>
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### SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

OMB No. 1545-0047

Open to Public

nartment of the Treasury mal Revenue Service

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 Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is offices in the (f) Total employees, agents, region (by type) (e.g., fundraising, program services, region a program service. expenditures for and independent describe specific type of and investments contractors investments, service(s) in region in region in region grants to recipients located in the region) Somalia & Kenya (1) 2 330 Program Services Health, Food, Shelter, 4,935,536 Albania (2) 2 Program Services Economic Dev., Educat 93,205 Bosnia (3) 5 Program Services Economic Dev., Food 100,103 Lebanon (4)3 Program Services Health, Education, Etc 144,429 Indonesia 2 Program Services Education, Econo. Dev. 213,236 Gaza (6) 1 Program Services Food, Shelter, Educat 241,058 Libya 1 Program Services Health, Food 366,524 Bangladesh (8) 1 Program Services Food, Shelter, Educatn 47,231 India (9) 1 Program Services Food, Shelter 14,075 Egypt 1 Program Services Food, Shelter 36,429 Syrian Refugees (11)3 Program services Food, Shelter, Health 325,008 Yemen (12)1 Program Services Health 33,334 (13)(14)(15)(16)(17)วิจ Sub-total ..... 6 351 6,550,168 Total from continuation sheets to Part I c Totals (add lines 3a and 3b) 351 6,550,168

3 Enter total number of other organizations or entities .....

	nedule F (Form 990) 2011 Mercy-USA For Aid & Development, Inc 38-2846307	<del></del>	Page 4
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	<b>X</b> No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to 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)	Yes	X 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	X 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	X 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	X 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 file Form 5713, International Boycott Report (see Instructions for Form 5713)	. Yes	X No

Schedule F (Form 990) 2011

## Part V Supplemental Information

Complete this part to 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, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds 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 organizations with their respective national governments. They are checked against the US Treasury Department, US State Department and United Nations lists of designated terrorists. They are also required to certify that they do not advocate, support or fund terrorist activities and that all funds received from Mercy-USA will be used strictly for humanitarian purposes. They are further required to submit their independently audited annual financial statements. Specific agreements are signed for each grant; these agreements contain further certifications, stipulate reporting requirements and limit use of funds to the specific project funded. Grant payments are paid in installments after receiving and approving narrative and financial reports. Reports include pictures of the 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 I, Line 3 - Activities per Region

Region	Expenditures Investments				
Somalia & Kenya	\$	4,935,536	\$	0	
Albania	\$	93,205	\$	0	
osnia	\$	100,103	\$	0	
Lebanon	\$	144,429	\$	0	

Part V Supple

Supplemental Information

Complete this part to 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).

	ou doublisj.		
Indonesia	\$	213,236 \$	0
Gaza	\$	241,058 \$	0
Libya	\$	366,524 \$	0
Bangladesh	\$	47,231 \$	0
India	<b>\$</b>	14,075 \$	0
Egypt	<b></b> \$	36,429 \$	0
Syrian Refugees	<b>\$</b>	325,008 \$	0
Yemen	\$	33,334 \$	0
· ·····	•••••		
Part V - Additional Information	L		
For Grants to Organizations out	side of the US	A, all recipient	s are
registered with their respectiv			
·			
	•••••		
	• • • • • • • • • • • • • • • • • • • •	•••••	
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## 7052 10/08/2012 4:02 PM SCHEDULE I (Form 990)

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

OMB No. 1545-0047 2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

Name of the organization  Mercy-USA For Aid		nent, I	nc			identification number 846307		
Part I General Information on Grants and								_
1 Does the organization maintain records to substantiate the selection criteria used to award the grants or assista 2 Describe in Part IV the organization's procedures for more Part II Grants and Other Assistance to Go to Form 990, Part IV, line 21, for any Part II can be duplicated if additional	nce?  onitoring the use of  overnments an  recipient that re	grant funds  Id Organ  eceived m	in the United States.	ited States Cor	molete if the or	tanization and	vored "V"	No
(a) Name and address of organization     or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
(1) Islamic Shura Council of Michigan 1830 West Square Lake Road Bloomfield Hills MI 48302	32-0157488		15,000		Book	TOT COST ASSISTANCE	Food Aid in the US	
(2)								
(3)								
(4)								
(5)								
(6)								
7)								
8)								_
9)								_
<ul> <li>Enter total number of section 501(c)(3) and government</li> <li>Enter total number of other organizations listed in the line</li> </ul>	e 1 table		1 table				> 1	_
For Paperwork Reduction Act Notice, see the Instructions	for Form 990.			- <del></del>	-		Schedule I (Form 990) (2011	<u>.</u>

Part III Grants and Other Assistance Part III can be duplicated if addi	to Individuals in the U	nited States. Com	plete if the organization	on answered "Yes" to Form	990, Part IV, line 22.
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2		-			
3					
1					
5					
3					
,					
Part IV Supplemental Information. Co	mplete this part to provide	de the information r	equired in Part I, line	2, and any other additional	information.
Part I, Line 2 - Procedures	s for Monitorin	g the Use of	Grant Funds	***************************************	
Grantees are required to su	abmit their For	ms 990 and i	ndependently	audited	•••••
annual financial statements	s, if applicabl	e. Specific	agreements a	re signed	
for each grant; these agree	ements contain	further cert	ifications, s		
reporting requirements and	limit use of f	unds to the	specific proj	ect	
funded.Grant payments are p	paid in install	ments after	receiving and		
approving narrative and fir	nancial reports	. Reports i	nclude pictur		
funded activities and benef	ficiaries. The	y also inclu	de copies of	all	
expense receipts and invoice	ces. Expenses :	must be supp	orted by spec	ific	
documentation in order to k	e accepted and	the grant f	unds paid.		

## SCHEDULE M (Form 990)

# **Noncash Contributions**

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

(c)

2011

Open To Public Inspection

OMB No. 1545-0047

artment of the Treasury anal Revenue Service

Name of the organization

Attach to Form 990.

(b)

Mercy-USA For Aid & Development, Inc Part I **Types of Property** 

(a)

Employer identification number 38-2846307

		(a) Check if	(b) Number of contributions or	(c) Noncash contribution amounts reported on	(d) Method of determi		
		applicable	items contributed	Form 990, Part VIII, line 1g	noncash contribution a	•	
1	Art—Works of art						
2	Art—Historical treasures						
3	Art—Fractional interests						
4	Books and publications						
5	Clothing and household						
_	goods						
6	Cars and other vehicles						
7	Boats and planes						
8 9	Intellectual property						
	Securities—Publicly traded						
10	Securities—Closely held stock						
11	Securities—Partnership, LLC,						
40	or trust interests						
12	Securities—Miscellaneous						
13	Qualified conservation						
	contribution—Historic						
14	structures						
14	Qualified conservation						
	contribution—Other						
40	Real estate—Residential						
16	Real estate—Commercial			·			
17	Real estate—Other						
18	Collectibles		-				
19	Food inventory	_ <u>x</u> _	1	488,789	FMV		
20	Drugs and medical supplies	X	1	255,535	FMV		
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other ►(						
	Other ►(						
	Other ► (						
28	Other ►(	1					
	Number of Forms 8283 received by the						
	which the organization completed Form	n 8283, Pa	art IV, Donee Acknowledg	ement	29		
20-	During the constant of the					Yes	No
	During the year, did the organization re						
	it must hold for at least three years from						
<b>b</b>	used for exempt purposes for the entire	e nolding p	period?			30a	X
	If "Yes," describe the arrangement in F		Barrathan ar and are all a constructions				
	Does the organization have a gift acce contributions?					31 X	
	Does the organization hire or use third	parties or	related organizations to s	olicit, process, or sell nonc	ash		v
	If "Yes," describe in Part II.					32a	X
33	If the organization did not report an am	nount in co	lumn (c) for a type of area	serty for which column (=) is	s shocked		
	describe in Part II.	iodin III CO	idinii (c) ioi a type oi prop	city for which column (a) is	o Greckeu,		
	perwork Reduction Act Notice, see the Instruct	ions for For	n 990				400
• •		OH FOR	000.		Sci	hedule M (Form 990)	(2011)

Schedule M (Form	Supplemental Information. Complete this part to provide the information required by Part I line 201, 201
	and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
_	, and the second
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### SCHEDULE O (Form 990 or 990-EZ)

nartment of the Treasury mal 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.

OMB No. 1545-0047

2011

Open to Public

Name of the organization

Mercy-USA For Aid & Development, Inc

Employer identification number 38-2846307

Form 990, Part III, Line 4d - All Other Accomplishment
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.
Form 990, Part V, Line 4b - Financial Accounts in Foreign Countries
Albania, Bosnia-Herzegovina, Kenya, Indonesia, Lebanon
Form 990, Part VI, Line 11b - Organization's Process 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 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
yes.

Name of the	organization
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Mercy-USA	For	Aid	&	Development, Inc

Employer identification number 38 - 2846307

	38-2846307
Form 990, Par	t VI, Line 15b - Compensation Process for Officers
	directors, which is solely composed of volunteers, reviews and
	Compensation of Organization's CEO and CFO by comparing
	by similar organizations. This review is further facilitated
	estar's or a similar annual Compensation Report, which
	ensation reported by all non profit entities in their recent
	ngs and breaks it down by type, size of the organization,
	tion, etc. The Board's decision is recorded in the minutes of
that relevant	
· ·····	
Form 990, Part	VI, Line 19 - Governing Documents Disclosure Explanation
	ndent audited financial statements and the Form 990 are
Recent indeper	and the roll 950 are
	the organization's website. Form 1023, the Articles of
available on t	
available on t	the organization's website. Form 1023, the Articles of
available on t	the organization's website. Form 1023, the Articles of and Conflict of Interest Policy are available upon request.
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Forms 990 / 990-PF	990 / 990-PF   Stiller Notes and Loans Receivable					
	For calendar year 2011, o	, and ending	2011			
Name					mployer Identification Number	
Mercy-USA For	Aid & Developm	ment, Inc		38-2846307		
Form 990, Par	t X, Line 7 - A	dditional				
(1) Notes Recei	Name of borrower  vable			Relationship to disqual	lified person	
(2)						
(3) (4)						
(5)						
(6) (7)						
(8)						
(9)						
(10)						
Original amount		NA-AII	l			
borrowed	Date of loan	Maturity date	Re	epayment terms	Interest rate	
(1) (2)						
(3)						
(4)						
(5) (6)						
(0)						
(9) (10)						
Secu	rity provided by borrower			Dumana after		
(1)	- John College			Purpose of loar	1	
(2)						
(3) (4)						
5)						
6)						
(7) (8)						
9)						
10)						
		F	alance due at	Balance due at	Fair market value	
	on furnished by lender	b	eginning of year	end of year	(990-PF only)	
(1) (2)			12,000	10,000	)	
3)						
<u>4)</u> 5)						
6)						
ත් <u> </u>						
8) 9)						
10)						
Totals			12,000	10,000	)	