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Form **990**

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.

OMB No. 1545-0047

2008

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning July 1 , 2008, and ending June 30 , 20 09

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Termination
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization Mennonite Economic Development Associates

Doing Business As MEDA

Number and street (or P.O. box if mail is not delivered to street address) Room/suite

1821 Oregon Pike 201

City or town, state or country, and ZIP + 4

Lancaster, PA 71601-6466

D Employer identification number 23 : 7398678

E Telephone number (800) 665-7026

G Gross receipts $ 14,571,845

F Name and address of principal officer: Allan Sauder

155 Frobisher Dr., I-106 Waterloo, ON N2V 2E1

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

I Tax-exempt status: ☑ 501(c) (3) ◄ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ► www.meda.org

H(c) Group exemption number ►

K Type of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other ►

L Year of formation: 1974

M State of legal domicile: PA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: As an association of Christians, faithful in daily work and committed to sharing abilities and resources, MEDA creates business solutions to poverty.

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)	3	22
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	22
5	Total number of employees (Part V, line 2a)	5	18
6	Total number of volunteers (estimate if necessary)	6	30
7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

Revenue

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	4,868,450	13,375,608
9	Program service revenue (Part VIII, line 2g)	1,366,908	860,971
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,194	3,208
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	7,855	332,058
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,246,407	14,571,845

Expenses

13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	196,779	569,524
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	415,786	481,101
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) ►		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	4,759,519	13,189,167
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	5,372,084	14,239,792
19	Revenue less expenses. Subtract line 18 from line 12	874,323	332,053

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Net Assets or Fund Balances

		Beginning of Year	End of Year
20	Total assets (Part X, line 16)	11,880,270	14,733,539
21	Total liabilities (Part X, line 26)	8,569,820	11,091,036
22	Net assets or fund balances. Subtract line 21 from line 20	3,310,450	3,642,503

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 — Date: 29. Jan. 10

Type or print name and title: GERHARD , CFO

Paid Preparer's Use Only

Preparer's signature | Date | Check if self-employed ► ☐ | Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4 | EIN ► | Phone no. ► ( )

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

916-17

10

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:
As an association of Christians, faithful in daily work and committed to sharing abilities and resources, MEDA creates business solutions to poverty.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☑ No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☑ No
If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services 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 $ 743,240 including grants of $ 13,677) (Revenue $ 415,292)
Programs facilitated the connection of faith and work through discussions, publications, convention for participants.

4b (Code:) (Expenses $ 12,122,975 including grants of $ 490,936) (Revenue $ 0)
Production, marketing and linkage programs in developing countries increase production for poor producers and communities, facilitate access to markets for products and provide valuable products (such as health products) to poor communities.

4c (Code:) (Expenses $ 625,429 including grants of $ 0) (Revenue $ 427,367)
Development of capital investment vehicles assist low-income persons in developing countries thorugh the provision of credit to create businesses and income generation.

4d Other program services. (Describe in Schedule O.)
(Expenses $ 345,445 including grants of $ 64,901) (Revenue $ 0)

4e **Total program service expenses** ▶ $ 13,837,089 *(Must equal Part IX, Line 25, column (B).)*

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	✓	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		✓
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4		✓
5	**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		✓
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		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		✓
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		✓
10	Did the organization hold assets in term, permanent, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		✓
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	✓	
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	✓	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		✓
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a	✓	
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	✓	
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	✓	
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Part III*	16		✓
17	Did the organization report more than $15,000 on Part IX, column (A), line 11e? *If "Yes," complete Schedule G, Part I*	17		✓
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		
19	Did the organization report more than $15,000 on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		✓
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		✓
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	✓	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? *If "Yes," complete Schedule J*	23		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to question 25*	24a		✓
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		✓
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		✓
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		✓
25a	**Section 501(c)(3) 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		✓
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? *If "Yes," complete Schedule L, Part I*	25b		✓
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	✓	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		✓

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
a	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, Part IV*	28a		✓
b	Have a family member who had a direct or indirect business relationship with the organization? *If "Yes," complete Schedule L, Part IV*	28b		✓
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? *If "Yes," complete Schedule L, Part IV*	28c		✓
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	✓	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		✓
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		✓
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	✓	
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		✓
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		✓
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		✓

Part V Statements Regarding Other IRS Filings and Tax Compliance

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a	25		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	18		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		✓	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* this return. (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	3a			✓
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 authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		✓	
b	If "Yes," enter the name of the foreign country: ▶ Canada See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			✓
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?	5c			
6a	Did the organization solicit any contributions that were not tax deductible?	6a			✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than $75?	7a			✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			✓
g	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 as required?	7h			
8	**Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			✓
9	**Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?	9a			✓
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			✓
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:				
a	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	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b			

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

Section 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 22		
b	Enter the number of voting members that are independent	1b 22		
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		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		✓
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		✓
6	Does the organization have members or stockholders?	6	✓	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	✓	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . .	7b	✓	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9a	Does the organization have local chapters, branches, or affiliates?	9a	✓	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, 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 organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10		✓
11	Is there any officer, director or 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*	11		✓

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	✓	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓	
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	✓	
13	Does the organization have a written whistleblower policy?	13	✓	
14	Does the organization have a written document retention and destruction policy?	14	✓	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			
a	The organization's CEO, Executive Director, or top management official?	15a	✓	
b	Other officers or key employees of the organization?	15b	✓	
	Describe the process in Schedule O. (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		✓
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ PA

18 Section 6104 requires an organization to make its Forms 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.

☐ Own website ☑ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of 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 and records of the organization: ▶ Gerald Morrison, 155 Frobisher Dr., I-106 Waterloo, ON N2V 2E1 519-725-1633

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 compensated employees; and former such persons.

☐ Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
see attached lsiting of directors	2	✓						0	0	0
Allan Sauder 258 Glendridge Rd. Waterloo, ON	37.5			✓	✓	✓		0	133,428	0
Gerhard Pries 21 Dill St. Kitchener, ON	37.5			✓	✓	✓		0	106,897	0
Kimberly Pityn 59 Byron Ave., London ON	37.5			✓	✓	✓		0	106,897	0
Timothy Piper 7041 Carlton Center Rd., Woodland, MI	37.5					✓		119,808	0	0
Howard Good Lititz, PA	37.5			✓	✓			86,000	0	0

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Total ▶								205,808	347,222	0

2 Total number of individuals (including those in 1a) who received more than $100,000 in reportable compensation from the organization ▶ 1

		Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*		✓
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*		✓
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? *If "Yes," complete Schedule J for such person*		✓

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
None		

2 Total number of independent contractors (including those in 1) who received more than $100,000 in compensation from the organization ▶

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a 0				
	b Membership dues	1b 0				
	c Fundraising events	1c 0				
	d Related organizations	1d 0				
	e Government grants (contributions)	1e 11,968,595				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 1,407,013				
	g Noncash contributions included in lines 1a-1f: $ 49,985					
	h **Total.** Add lines 1a–1f ▶		13,375,608			
Program Service Revenue		Business Code				
	2a Convention fees		218,084	218,084	0	0
	b Publications, sponsorships		66,594	66,594	0	0
	c Program related investment ir		440,575	440,575		
	d Consulting fees		135,718	135,718		
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a–2f ▶		860,971			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		3,208	0	0	3,208
	4 Income from investment of tax-exempt bond proceeds ▶		0			
	5 Royalties ▶		0			
		(i) Real / (ii) Personal				
	6a Gross Rents	0 / 0				
	b Less: rental expenses	0 / 0				
	c Rental income or (loss)	0 / 0				
	d Net rental income or (loss) ▶		0			
		(i) Securities / (ii) Other				
	7a Gross amount from sales of assets other than inventory	0 / 0				
	b Less: cost or other basis and sales expenses	0 / 0				
	c Gain or (loss)	0 / 0				
	d Net gain or (loss) ▶		0			
	8a Gross income from fundraising events (not including $ ..... of contributions reported on line 1c). See Part IV, line 18 a	0				
	b Less: direct expenses b	0				
	c Net income or (loss) from fundraising events ▶		0			
	9a Gross income from gaming activities. See Part IV, line 19 a	0				
	b Less: direct expenses b	0				
	c Net income or (loss) from gaming activities ▶		0			
	10a Gross sales of inventory, less returns and allowances a	0				
	b Less: cost of goods sold b	0				
	c Net income or (loss) from sales of inventory ▶		0			
	Miscellaneous Revenue	Business Code				
	11a Miscellaneous		15,279	15,279		
	b Currency exchange gains		316,779	316,779		
	c					
	d All other revenue					
	e **Total.** Add lines 11a–11d ▶		332,058			
	12 **Total Revenue.** Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e ▶		14,571,845			

Part IX 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).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	13,677	13,677		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	0	0		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	555,847	555,847		
4 Benefits paid to or for members	0	0		
5 Compensation of current officers, directors, trustees, and key employees	86,000	86,000	0	0
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7 Other salaries and wages	182,811	61,027	0	121,784
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	37,524	28,857	0	8,667
9 Other employee benefits	102,815	93,259	0	9,556
10 Payroll taxes	71,951	63,746	0	8,205
11 Fees for services (non-employees):				
a Management	302,997	144,223	0	158,774
b Legal	9,665	1,306	5,768	2,591
c Accounting	1,500	1,500	0	0
d Lobbying	0	0	0	0
e Professional fundraising services. See Part IV, line 17	0			0
f Investment management fees	310,452	310,452	0	0
g Other	24,783	24,783	0	0
12 Advertising and promotion	20,665	3,894	0	16,771
13 Office expenses	64,257	21,997	26,657	15,603
14 Information technology	0	0	0	0
15 Royalties	0	0	0	0
16 Occupancy	30,793	0	30,793	0
17 Travel	102,418	27,117	50,716	24,585
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19 Conferences, conventions, and meetings	18,252	12,311	5,067	874
20 Interest	314,977	314,977	0	0
21 Payments to affiliates	0	0	0	0
22 Depreciation, depletion, and amortization	4,930	1,854	2,095	981
23 Insurance	6,150	0	6,150	0
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.)				
a Staff training and recruitment	6,826	219	822	5,785
b Printing, mailing and publications	51,746	49,639	0	2,107
c Direct program expenditures	11,772,402	11,772,402	0	0
d Miscellaneous	4,508	3,733	683	92
e Management cost allocations	141,846	244,269	(128,751)	26,328
f All other expenses				
25 **Total functional expenses.** Add lines 1 through 24f	14,239,792	13,837,089	0	402,703
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				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		521,472	1	952,872
	2	Savings and temporary cash investments		0	2	0
	3	Pledges and grants receivable, net		579,700	3	1,946,375
	4	Accounts receivable, net		532,670	4	122,928
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		0	5	0
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		0	6	0
	7	Notes and loans receivable, net		1,226,408	7	2,927,991
	8	Inventories for sale or use		0	8	0
	9	Prepaid expenses and deferred charges		1,559	9	13,033
	10a	Land, buildings, and equipment: cost basis	10a 58,036			
	b	Less: accumulated depreciation. Complete Part VI of Schedule D	10b 56,132	5,214	10c	1,904
	11	Investments—publicly traded securities		0	11	0
	12	Investments—other securities. See Part IV, line 11		0	12	0
	13	Investments—program-related. See Part IV, line 11		9,013,247	13	8,768,436
	14	Intangible assets		0	14	0
	15	Other assets. See Part IV, line 11		0	15	0
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		11,880,270	16	14,733,539
Liabilities	17	Accounts payable and accrued expenses		42,161	17	2,199,098
	18	Grants payable		0	18	0
	19	Deferred revenue		307,042	19	98,900
	20	Tax-exempt bond liabilities		0	20	0
	21	Escrow account liability. Complete Part IV of Schedule D		0	21	0
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		685,725	22	611,137
	23	Secured mortgages and notes payable to unrelated third parties		0	23	0
	24	Unsecured notes and loans payable		7,534,892	24	8,181,901
	25	Other liabilities. Complete Part X of Schedule D		0	25	0
	26	**Total liabilities.** Add lines 17 through 25		8,569,820	26	11,091,036
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		3,310,450	27	3,642,503
	28	Temporarily restricted net assets		0	28	
	29	Permanently restricted net assets		0	29	
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		3,310,450	33	3,642,503
	34	Total liabilities and net assets/fund balances		11,880,270	34	14,733,539

Part XI Financial Statements and Reporting

			Yes	No
1		Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other		
2a		Were the organization's financial statements compiled or reviewed by an independent accountant?		
b		Were the organization's financial statements audited by an independent accountant?	✓	
c		If "Yes" to lines 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?	✓	
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?	✓	
b		If "Yes," did the organization undergo the required audit or audits?	✓	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

2008

Open to Public Inspection

Name of the organization	Employer identification number
Mennonite Economic Development Associates	23 : 7398678

Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is: (Please check only **one** organization.)

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).** (Attach Schedule H.)

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: .....

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☑ An organization that normally receives: (1) more than 33⅓ % 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 33⅓ % 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).** (see instructions)

11 ☐ 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.

a ☐ Type I b ☐ Type II c ☐ Type III–Functionally integrated d ☐ Type III–Other

e ☐ 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).

f 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 . . . . . ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
11g(i) (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(ii) (ii) A family member of a person described in (i) above?		
11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above?		

h Provide the following information about the organizations the organization supports.

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)** (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1-3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) 12

13 **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

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) . . . . 14 %

15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f . . . . . 15 %

16a **33⅓% support test—2008.** If the organization did not check the box on line 13, and line 14 is 33⅓% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

b **33⅓% support test—2007.** If the organization did not check a box on line 13 or 16a, and line 15 is 33⅓% 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 . . . ▶ ☐

b **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 . . . . . ▶ ☐

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3,257,706	2,454,893	3,038,226	4,868,450	13,375,608	26,984,883
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	841,532	459,424	1,033,885	1,366,908	860,971	4,562,720
3 Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
5 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
6 **Total.** Add lines 1-5	4,099,238	2,914,317	4,072,111	6,235,358	14,236,579	31,547,603
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	72,045	74,338	108,127	117,890	118,203	490,603
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	478,051	90,187	632,765	1,199,173	99,143	2,499,319
c Add lines 7a and 7b	550,096	164,525	740,892	1,317,063	217,346	2,989,922
8 **Public support** (Subtract line 7c from line 6.)						28,557,681

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6	4,099,238	2,914,317	4,072,111	6,234,358	14,236,579	31,547,603
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	21,877	49,611	5,838	3,194	3,208	83,728
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0
c Add lines 10a and 10b	21,877	49,611	5,838	3,194	3,208	83,728
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	0	0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	12,937	7,855	332,058	352,850
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						31,984,181

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	89.5 %
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	85.6 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2008** (line 10c, column (f) divided by line 13, column (f))	17	0.3 %
18 Investment income percentage from **2007** Schedule A, Part IV-A, line 27h	18	0.6 %

19a **33⅓ % support tests—2008.** If the organization did not check the box on line 14, and line 15 is more than 33⅓ %, and line 17 is not more than 33⅓ %, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☑

b **33⅓ % support tests—2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33⅓ %, and line 18 is not more than 33⅓ %, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

Other income includes miscellaneous income and currency exchange gains.

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 Inspection

Name of the organization

Mennonite Economic Development Associates

Employer identification number

23 : 7398678

Part I **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
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 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? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? ☐ Yes ☐ No

Part II **Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or pleasure)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of certified historic structure

2 Complete lines 2a–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 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)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ .....

4 Number of states where property subject to conservation easement is located ▶ .....

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ .....

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ $ .....

8 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)? ☐ Yes ☐ No

9 *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, 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, 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 ▶ $ .....

2 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 relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ▶ $ .....

b Assets included in Form 990, Part X ▶ $ .....

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other .....

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . ☐ Yes ☐ No

Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? . . . ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? . . . ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Investment earnings or losses					
d 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 year end balance held as:

a Board designated or quasi-endowment ► .....%
b Permanent endowment ► .....%
c Term endowment ► .....%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of Investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		58,036	56,132	1,904
e Other				
Total. Add lines 1a–1e. *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ►				1,904

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: 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
see schedule attached		Cost and equity consolidation
Total. *(Column (b) should equal Form 990, Part X, col. (B) line 13.)* ▶	8,768,436	

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	
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 statements that reports the organization's liability for uncertain tax positions under FIN 48.

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	14,571,845
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	14,239,792
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	332,053
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	392,234
9	Total adjustments (net). Add lines 4–8	9	392,234
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	724,287

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	24,921,999
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	10,350,154		
e	Add lines 2a through 2d			2e	10,350,154
3	Subtract line 2e from line 1			3	24,921,999
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines 4a and 4b			4c	0
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)			5	14,571,845

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	24,197,712
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Losses reported on Form 990, Part IX, line 25	2c			
d	Other (Describe in Part XIV)	2d	9,957,920		
e	Add lines 2a through 2d			2e	9,957,920
3	Subtract line 2e from line 1			3	14,239,792
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines 4a and 4b			4c	0
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)			5	14,239,792

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

Revenue, expense and net income included in the financial statements but not in the 990 represent the revenue, expense and net income pertaining to combined and consolidated entities included in the combined and consolidated financial statements but not in the 990.

Part XIV Supplemental Information *(continued)*

Schedule F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

2008

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

Name of the organization

Mennnite Economic Development Associates

Employer identification number

23 7398678

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 **For grantmakers.** 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? . . . . . ☑ Yes ☐ No

2 **For grantmakers.** Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States.

3 Activities per Region. (Use Schedule 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
South America	0	1	grants		44,190
Central American and Carribe	0	1	grants		53,902
Middle East and North Africa	0	1	grants		7,905
Russia and Newly Independer	0	1	grants		69,610
South Asia	0	1	grants		139,939
Sub-Saharan Africa	0	1	grants		44,771
South Asia	1	2	program services	micro enterprise	119,786
Sub-saharan Africa	1	3	program services	health services	11,287,806
Totals . . . . . ►					11,767,609

Part II **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 . . . . . ▶ ☐
Use Schedule F-1 (Form 990) if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	microenter	30,000	wire transf			
		South America	microenter	53,902	wire transf			
		Middle East and North A	microenter	7,905	wire transf			
		South Asia	microenter	139,939	wire transf			
		Sub-saharan Africa	microenter	44,771	wire transf			
		Russian and newly inde	microenter	65,162	wire transf			
		South America	microenter	14,190	wire transf			

2 Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ▶ 0

3 Enter total number of other organizations or entities . . . . . ▶ 7

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.

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

Part IV **Supplemental Information**

Complete this part to provide the information required in Part I, line 2, and any other additional information.

Recipients of awards are required to be screened through a due diligence process. Agreements are required that stipulate the types of activities undertaken and how funds will be used. Regular programmatic and financial reports are required and variances are follow up on.

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization
Mennonite Economic Development Associates

Employer identification number
23 : 7398678

Part I General Information on Grants and Assistance

1 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? . . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II 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 . . . . . ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MEDA Colorado Chapter			11,377				

2 Enter total number of section 501(c)(3) and government organizations . . . . . ▶ 0

3 Enter total number of other organizations . . . . . ▶ 1

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(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

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

A proposal on what type of work will be completed is required with a budget for the work undertaken. Financial and narrative reports are received regularly and monitored.

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

► Attach to Form 990 or Form 990-EZ.
► To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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2008

Open To Public Inspection

Name of the organization	Employer identification number
Mennonite Economic Development Associates	23 : 7398678

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1 (a) Name of disqualified person	(b) Description of transaction	(c) Corrected? Yes	(c) Corrected? No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 . . . . . ► $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ► $

Part II Loans to and/or From Interested Persons.

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization? To	(b) From	(c) Original principal amount	(d) Balance due	(e) In default? Yes	(e) No	(f) Approved by board or committee? Yes	(f) No	(g) Written agreement? Yes	(g) No
see attached schedule	✓					✓	✓		✓	
Total . . . . . ► $				621,137						

Part III Grants or Assistance Benefitting Interested Persons.

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons.

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues? Yes	(e) No

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

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

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2008

Open To Public Inspection

Name of the organization
Mennonite Economic Development Associates

Employer identification number
23 : 7398678

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
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	Intellectual property				
9	Securities—Publicly traded				
10	Securities—Closely held stock	✓	1	49,985	appraised fair value
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				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ► (.....)				
26	Other ► (.....)				
27	Other ► (.....)				
28	Other ► (.....)				

			Yes	No
29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29	0	
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		✓
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31		✓
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		✓
b	If "Yes," describe in Part II.			
33	If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.			

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.

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 Inspection

Name of the organization

Mennonite Economic Development Associates

Employer identification number

23 7398678

Directors of the corporation are required to declare any contflicts of interest prior to voting on a motion.

Compensation of the CEO is approved by the Board of Directors. The Board also approves overall average wage increases provided to staff.

Financial statements and the 990 are available to the public upon request and are filed a various charity web-sites.

Name of the organization	Employer identification number

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

▶ See separate instructions.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

Mennonite Economic Development Associates

Employer identification number

23 : 7398678

Part I Identification of Disregarded Entities

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
~~Sarona Global Investment Fund Inc. 1821 Oregon Pike, Suite 201, Lancaster PA~~	raise capital for poor	PA	501 (c) 3	7	N/A
~~Mennonite Economic Development Associates of Canada, 155 Frobisher Dr. Waterloo ON N2V 2E1~~	economic developmer	Canada			N/A

Part III Identification of Related Organizations Taxable as a Partnership

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income (related, investment, unrelated)	(F) Share of total income	(G) Share of end-of-year assets	(H) Disproportionate allocations? Yes	(H) No	(I) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner? Yes	(J) No
Sarona Risk Capital Fund---1 L P 1821 Oregon Pike	investment	PA	MEDA Investn	investment	0	0		✓			✓

Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership
MEDA Investments Inc. 1821 Oregon Pike, Suite 201---Lancaster PA 17601	Investment mar	PA		C	41,003	47,380	100%

Part V Transactions With Related Organizations

Note. Complete line 1 if any entity is listed in Parts II, III, or IV.		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		✓
b Gift, grant, or capital contribution to other organization(s)	1b	✓	
c Gift, grant, or capital contribution from other organization(s)	1c		✓
d Loans or loan guarantees to or for other organization(s)	1d		✓
e Loans or loan guarantees by other organization(s)	1e	✓	
f Sale of assets to other organization(s)	1f		✓
g Purchase of assets from other organization(s)	1g		✓
h Exchange of assets	1h		✓
i Lease of facilities, equipment, or other assets to other organization(s)	1i		✓
j Lease of facilities, equipment, or other assets from other organization(s)	1j		✓
k Performance of services or membership or fundraising solicitations for other organization(s)	1k	✓	
l Performance of services or membership or fundraising solicitations by other organization(s)	1l	✓	
m Sharing of facilities, equipment, mailing lists, or other assets	1m	✓	
n Sharing of paid employees	1n	✓	
o Reimbursement paid to other organization for expenses	1o	✓	
p Reimbursement paid by other organization for expenses	1p	✓	
q Other transfer of cash or property to other organization(s)	1q		✓
r Other transfer of cash or property from other organization(s)	1r		✓

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(A) Name of other organization(s)	(B) Transaction type (a–r)	(C) Amount involved
(1)	Mennonite Economic Development Associates regularly conducts business with, executes programs with and shares resources with its sister organization, a tax-exempt Canadian charity - Mennonite Economic Development Associates of	b,e,k,l,m,n,o,p	1,200,000
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		(E) Share of end-of-year assets	(F) Disproportionate allocations?		(G) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(H) General or managing partner?	
			Yes	No		Yes	No		Yes	No

LISTING OF BOARD MEMBERS AND EXECUTIVE STAFF

last update. November 2009

Dale E. Beachey	Bus.		Region:	Gulf States
4929 Old Creek Dr.	Home	941-929-1483	Term Expires:	2009
Sarasota, FL 34233	Fax		First Elected	2006
Bahia Vista Mennonite/Mennonite Church	Cell	941-302-0670	Spouse.	Verda
Owner, Dale Beachey Financial & Management Consulting	Email	daleb46@verizon net	Chapter :	Sarasota
Bryce Bergey	Bus.	215-721-2446	Region:	Member-at-large
2928 Penn Street	Home	267-263-4358	Term Expires	2011
Hatfield, PA 19440	Fax	215-721-4010	First Elected.	2008
Investment Officer, Univest Corp	Cell	215-480-4274	Spouse	Maureen
Blooming Glen Mennonite Church	Email	BergeyB@univest net	Chapter	Delaware Valley
Thomas R. Bishop ●	Bus	303-764-5737	Region	Member-at-large
5385 Autumn Dr	Home	303-771-0744	Term Expires	2009
Greenwood Village, CO 80111	Fax	303-764-5770	First Elected	2003
Sr. VP, D A Davidson & Co	Cell	303-907-9907	Spouse.	Trinda
First Mennonite Church	Email	ttbishop@ix.netcom com	Chapter	Colorado
Sid Burkey	Bus	402-761-3599	Region	North Central
3404 Rokeby Road	Home	402-761-2093	Term Expires.	2011
Dorchester, NE 68343	Fax	402-761-2013	First Elected	2005
President, Burkey Farms Inc	Cell	402-641-6992	Spouse	Peg
Bellwood Mennonite Church	Email	sid@burkeyfarms com	Chapter	
Debbie Sauder David ●	Bus.	419-446-2541	Region	Great Lakes
406 Quail Run	Home	419-445-1635	Term Expires	2009
Archbold, OH 43502	Fax	419-445-5251	First Elected	2006
Executive Director, Sauder Village	Email	ddavid@saudervillage org	Spouse	David
Archbold United Methodist			Chapter	NW Ohio
Kevin Dorsing	Bus	509-346-1520	Region	North West
11435 Rd E S E	Home	509-346-1083	Term Expires	2010
Othello, WA 99357	Fax	509-346-2098	First Elected	2007
CEO/Partner, Royal Ridge Fruit	Cell		Spouse	Wanda
Warden Mennonite	Email	kdorsing@smwireless net	Chapter :	
Leona Marie Friesen (Lee)	Bus	204-487-7412	Region	Member-at-large
77 Shorecrest Drive	Home	204-488-2630	Term Expires	2010
Winnipeg, MB R3P 1P4	Fax	204-488-9823	First Elected	2001
-Vice President, A D Friesen Enterprises Ltd	Fax	204-489-7374 Home	Spouse:	Albert (Bert)
Fort Garry Mennonite Fellowship /Mennonite	Cell	204-228-7282	Chapter	Winnipeg
	Email	adfriesen@medicure com		
Lorna Goertz ■	Bus.	604-691-6828	Region:	Pacific - Cdn
14-8891 Cook Road	Home	604-278-0262	Term Expires:	2009
Richmond, BC V6Y 3L9	Fax	604-688-3497	First Elected	2003
Sr. Manager, Wolrige Mahon	Email	lgoertz@wolrigemahon com	Chapter:	Vancouver
Peace Mennonite				
Marion E. Good ● ■	Bus.	519-595-8796	Region.	Eastern – Cdn
124 David St.	Home	519-656-2246		Secretary
Wellesley, ON N0B 2T0	Fax	519-595-8799	Term Expires.	2010
Branch Manager, MSCU	Cell	519-276-9313	First Elected.	2004
Erb Street Mennonite	Email	mgood@mscu com	Spouse.	
			Chapter .	Waterloo
David R. Guenther (Dave)	Bus.	204-947-7180	Region:	Midwest - Cdn
54 William Marshall Way	Home	204-831-5907	Term Expires:	2010
Winnipeg, MB R3R 3T2	Fax	204-957-1241	First Elected:	2001
-President, ROADTRIPS INC.	Email	dave@roadtrips com	Spouse:	Liesa (Lisa)
Ness Avenue Baptist/Baptist General Conf			Chapter .	Winnipeg

Alex Hartzler
1947 Green Street
Harrisburg, PA 17102
President, WCI Partners, LP

Bus.	
Home	
Fax	717-234-0454
Cell	717-421-0143
Email	hartzlerja@comcast net

Region:	Member-at-large
Term Expires:	2009
First Elected	2006
Spouse:	
Chapter ·	Lancaster

Michelle E. Horning
309E Washington Street
Goshen, IN 46528
Assoc. Prof. of Accounting, Goshen College
Eighth St. Mennonite

Bus.	574-535-7453
Home	574-534-1141
Fax	574-535-7293
Email	michelleeh@goshen edu

Region:	Middle West
Term Expires:	2010
First Elected:	2004
Spouse	Chad
Chapter :	Michiana

Arlowyne Klassen (Arli)
603 W Chestnut Street
Lancaster, PA 17603
Exec Dir., MCC
East Chestnut Mennonite Church

Bus.	717-859-1151
Home	717-293-5671
Fax	717-859-2171
Cell	717-538-4513
Email	arlik@mcc org

Region.	Member-at-large
Term Expires:	2011
First Elected.	2008
Spouse	Keith Regehr
Chapter	

Allon Lefever ●
2694 Eversole Road
Harrisonburg, VA 22802
Pres., AB Hospitality Co
Harrisonburg Mennonite Church

Bus.	540-459-7111
Home	540-574-3320
Fax	540-432-4071
Cell	540-421-6888
Email	allon.lefever@emu edu

Region	Member-at-large
	Vice Chair
Term Expires	2011
First Elected·	2002
Spouse	Doris
Chapter	Virginia

Yvonne E. Martin ●
241 W. Lisburn Rd
Mechanicsburg, PA 17055
Asst Professor, Messiah College
Grantham Brethren in Christ

Bus	717-766-2511 x2610
Home	717-697-1929
Fax	717-691-6057
Cell	717-439-6659
Email	ymartin@messiah edu

Region	Northeast
Term Expires	2009
First Elected	2003
Spouse	Kenneth
Chapter	

Thom Moore
2510 Prairie Ridge Place
Champaign, IL 61822
1st Mennonite Church

Bus	
Home	217-351-2108
Fax	
Cell	217-649-4826
Email	t-moore3@uiuc edu

Region	Member-at-large
Term Expires	2010
First Elected	2004
Spouse	Martha

R. Clair Sauder (Clair)
630 Millcross Road
Lancaster, PA 17601
-retired business owner
Forest Hills Mennonite/Mennonite Atlantic Coast Conference

Bus	
Home	717-393-7221
Fax	
Cell	717-682-8477
Email	rcs43@comcast net

Region	Member-at-large
Term Expires	2010
First Elected	2001
Spouse	Doris
Chapter	Lancaster

James Schlegel (Jamie)
c/o RBJ Schlegel Holdings Inc.
325 Max Becker Drive, Suite 201
Kitchener, ON N2E 4H5
President, R B J Schlegel Holdings
Stirling Avenue Mennonite

Bus	519-571-1873
Home	519-741-7492
Fax	519-571-0947
Cell	519-741-7492
Email	jschlegel@rbjschlegel com

Region	Atlantic
Term Expires	2010
First Elected	2007
Spouse	Juliane Shantz
Chapter	Waterloo

Robert C. Shuh ■
6728 Line 86
Elmira, ON N3B 2Z2
Owner/Manager, Shuh Farms & Shuhbox Storage
Waterloo MB Church

Bus.	
Home	519-669-1297
Cell	519-590-1297
Email	shuhfarm@golden.net

Region	Member-at-large
Term Expires	2010
First Elected	2004
Spouse	Lisa
Chapter :	Waterloo

Laura Stephenson
5995 Layton Street
Rancho Cucamonga, CA 91737
Owner, 4D Concepts
Upland Brethren in Christ

Bus.	909-944-1980 x24
Home	909-948-3118
Fax	909-944-0741
Cell	909-210-6354
Email	lstephenson@4dconceptsusa com

Region	West Coast
Term Expires:	2010
First Elected.	2007
Spouse:	Phil
Chapter ·	

Melvin R. Stjernholm (Mel) ●
105 Windwood Circle
PO Box 9218
Breckenridge, CO 80424
-President & Medical Director
Flatirons Osteoporosis Centre
First Mennonite Church-Denver / Mennonite

Bus. 303-444-4441
Home 970-547-1385
Fax 303-499-3124
Cell 303-579-3196
Email diabetes8@aol.com

Region: Prairie - Chair
Term Expires. 2010
First Elected: 2001
Spouse: Carolyn
Chapter: Colorado

Paul Tiessen ■
214 Braeshire Lane
Saskatoon, SK S7V 1B2
-President, Action Office Interiors
Nutana Park Mennonite/General Conf.

Bus. 306-653-4047
Home 306-374-8161
Fax 306-665-0207
Cell 306-221-1223
Email paul@actionofficeinteriors com

Region: Member-at-large
Term Expires: 2011
First Elected: 2002
Spouse: Lois
Chapter: Saskatoon

Members Elect

Michael Horsch
Gut Sitzenhof 1
Schwandorf GERMANY
CEO/Owner, HORSCH

Bus 09431 71430
Home 09431 714324
Fax 09431 41364
Cell 0172 7769600
Email m horsch@horsch com

Region Member-at-large
Term Expires
First Elected. 2009
Spouse Cornelia
Chapter .

● MEDA Executive Committee
■ MEDA Canada Board Executive

Senior Management Team

Allan Sauder
President
155 Frobisher Dr., Ste I-106
Waterloo, ON N2V 2E1

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Fax. 519-725-9083
Spouse Donna

Gerhard Pries
Chief Financial Officer
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Waterloo, ON N2V 2E1

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Home 519-579-5225
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Email gpries@meda org

Fax 519-725-9083
Spouse Hilda

Howard Good
Vice-Pres., Member Engagement
1821 Oregon Pike, Suite 201
Lancaster, PA 17601

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Email hgood@meda.org

Fax. 717-560-6549
Spouse: Gloria Shenk

Kim Pityn
Vice-President, International Operations
155 Frobisher Dr , Ste I-106
Waterloo, ON N2V 2E1

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Cell 519-636-1429
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Fax 519-725-9083
Spouse Peter

Marilyn Friedmann
Interim Vice-President, Marketing &
Resource Development
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Waterloo, ON N2V 2E1

Bus 519-725-1633
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Fax 519-725-9083
Spouse:

Board Administration

Cynthia Atkinson
Manager Corporate Administration
155 Frobisher Dr , Ste I-106
Waterloo, ON N2V 2E1

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Fax 519-725-9083

MEDA Winnipeg Office
302-280 Smith Street
Winnipeg, MB R3C 1K2

Bus. 204-956-6437
Toll 1-800-665-7026
Fax 204-942-4001

MEDA Lancaster Office
1821 Oregon Pike, Suite 201
Lancaster, PA 17601 USA

Bus. 717-560-6546
Toll 1-800-665-7026
Fax 717-560-6549

Mennonite Economic Development Associates
Form 990 Schedule D

30-Jun-09

Part VIII - Program Related Investments

Program Related Notes Receivable

Name of Corporation	Carrying Value	Cost basis
AMSA	725,002	Cost
CODIP S.A.	64,706	Cost
MEDA Paraguay	27,611	Cost
MEDA Paraguay	7,256	Cost
MEDA Paraguay	3,117	Cost
MEDA Paraguay	11,335	Cost
MEDA Paraguay	4,026	Cost
MEDA Paraguay	1,900	Cost
MEDA Paraguay	18,000	Cost
Clady S.A.	8,550	Cost
CHISPA	720,800	Cost
CHISPA	1,797,883	Cost
Colorado MEDA Chapter Investment Company	3,422	Cost
Smucker Co.	197,000	Cost
ASSETS Toledo	15,000	Cost
Economic Corporation of the Delta	300,000	Cost
Sevis Fonkoze	112,500	Cost
IMON Foundation	37,500	Cost
Unibank	375,000	Cost
Microvest LLC	201,563	Cost
Microvest Canada	101,394	Cost
	4,733,565	

Program Related Investments

Investee	Carrying Value	
MEDA Investments Inc.	100	Cost
CODIP S.A.	722,990	Equity consolidation
CHISPA	1	Equity consolidation
Global MicroFinance Group	95,665	Cost
ERPAR	524,114	Equity consolidation
DIRSSA	30,000	Cost
IMON	698,540	Equity consolidation
Agro Capital Management	100,928	Equity consolidation
Sarona Risk Capital Fund 1, L.P.	375,409	Cost
MicroVest LLC	196,625	Equity consolidation
MicroVest 1,L.P.	1,290,499	Equity consolidation
	4,034,871	

Total Other Assets	8,768,436

Mennonite Economic Development Associates
Form 990
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Schedule L Part II

Name	Title	Date of Note	Maturity	Terms	Interest Rate	Original Amount	Loan Payable
J. Verda Beachey	Former Director	Nov-05	Oct-09	Unsecured	6%	$ 25,000.00	$ 25,000.00
Ripple Foundation	Controlled by a Director	Nov-05	Oct-09	Unsecured	6%	$ 25,000.00	$ 25,000.00
Alex Hartzler	Director	various	various	Unsecured	6 - 8.3%	$ 399,974.00	$ 391,150.00
Tomas Bishop	Director	Aug-06	Jul-05	Unsecured	variable	$ 149,987.00	$ 149,987.00
Mel Stjernholm	Director	Sep-07	Sep-11	Unsecured	variable	$ 30,000 00	$ 30,000.00
						$ 629,961.00	$ 621,137.00