

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



DLN: 93493112005090

Form 990

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)

2008

Open to Public

Department of the Treasury
Internal Revenue Service

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

\ F-	rthe ?	2008'	endar ::==	r ortay year hoginning 07 01 2000	and anding OF 20 200	<u> </u>										
				r, or tax year beginning 07-01-2008 C Name of organization	and ending 00-30-200		D Employer ider	ntification number								
_	eck II ap dress cha	ange	Please use IRS	Anabaptist Foundation			75-3187397	,								
_	me chan	_	label or print or	Doing Business As			E Telephone nui									
_	ial retur	.90	type. See Specific													
_	mination		Specific Instruc- tions.	Number and street (or P O box if mail is no 1245 Old Route 15	ot delivered to street addre	ss) Room/suite	G Gross receipts	\$ \$ 1,854,365								
– Am	ended r	eturn		City or town, state or country, and ZIP + 4												
– App	olication	pending		New Columbia, PA 17856												
		-	F Nan	ne and address of Principal Officer		H(a) Is thu	L s a group return i	for								
						affiliat		⊤Yes ▼ No								
						H/h) Ara all	affiliates included	d?								
Ta	x-exem	pt status	▽ 501(c)	(3) ◀ (insert no)	527			See instructions)								
w	eb site	e: F				1	p Exemption Nun									
Тур	e of orga	anızatıon	✓ Corporat	on trust association other		L Year of For	mation 2005 M S	State of legal domicile PA								
Pa	rt I	Sumn	nary													
				e organization's mission or most signif												
<u>3</u>	1	A nabaptist Foundation has been established to assist donors in channeling material resources within the Kingdom of Christ and														
		to provide donors with financial counsel consistent with conservative Anabaptist beliefs and values														
	2	Check th	nis box 🗀	of the organization discontinued its ope	erations or disposed o	f more than 2!	5% of its assets									
3	3	Number	of voting r	nembers of the governing body (Part V	I, line 1a)		3	10								
5				dent voting members of the governing				4								
2	5	Total nur	mber of en	nployees (Part V, line 2a)				0								
Acumines &	6	Total nur	mber of vo	lunteers (estimate if necessary) .		_										
ì	7a	Total gro	ss unrela	ted business revenue from Part VIII, l	ıne 12, column (C)		7a	0								
	b	Net unre	lated busi	ness taxable ıncome from Form 990-T	, line 34		7b	0								
a.						Prio	r Year	Current Year								
	8	Contrib	utions and	I grants (Part VIII, line 1h)		1,123,288	1,290,051									
를	9	Progran	n service	revenue (Part VIII, line 2g)			201,102	290,630								
Revent	10	Investn	nent incor	ne (Part VIII, column (A), lines 3, 4, a	ınd 7d)		30,079	12,289								
—	11		=	art VIII, column (A), lines 5, 6d, 8c, 9				0								
	12	Total re	venue—a	dd lines 8 through 11 (must equal Part	e	1,354,469	1,592,970									
	13		and simila	r amounts paid (Part IX, column (A), li	ınes 1–3)		506,927	881,503								
	14			r for members (Part IX, column (A), lır	•		,	0								
40	15			empensation, employee benefits (Part 1		5-										
& &		10)						32,322								
Expenses	16a			raising fees (Part IX, column (A), line	11e)			0								
五	b			penses, Part IX, column (D), line 25 23,391)											
	17			Part IX, column (A), lines 11a-11d, 1			250,745	278,820								
	18		•	add lines 13-17 (must equal Part IX,	line 25, column (A))		757,672	1,192,645								
. <u> </u>	19	Kevenu	e less exp	enses Subtract line 18 from line 12		n	596,797	400,325								
9 E		.		1. V. June 4.6.		Beginni	ng of Year	End of Year								
7 W	20		•	t X, line 16)			4,875,409	9,460,039								
net Assets ta Fund Balances	21		•	Part X, line 26)			4,091,247	8,155,393								
_	22			d balances Subtract line 21 from line	20		784,162	1,304,646								
Pa	rt II		ture Blo		m including account	cchodulas = = - 1	totomorto and to !!	a bact of my knowledge								
				rjury, I declare that I have examined this retur correct, and complete Declaration of preparer (
Plea		****				2010-	04-13									
Sign		Signat	ture of office	r		Date										
ler	u			PERATIONS OFFI												
		Туре	or print nam	e and title												
		Preparer's				Check If self-	Preparer's PTIN (S	See Gen Inst)								
Paid		signature	▼ Mark A	a rayne 20		empolyed •										
•	arer's		me (or yours	Byerley Payne & White CPA PA	L		EIN Þ									
Jse (Only	ıf self-em address, a	ployed), and ZIP + 4	114 WN First Street			LIIV F									
				Seneca SC, SC 29678			Phone no 🕨 (86	4) 882-1937								
1ay 1	the IRS	S discuss	this retu	rn with the preparer shown above? (Se	e instructions)											

Part III Statement of Program Service Accomplishments (See the instructions.)

	Anabaptist Foundation has been establisi consistent with conservative Anabaptist b		ling material resources within	the Kingdom of Christ and to prov	ide donors with financial counsel
	Did the every water water to			which were not listed on	
2	Did the organization undertake a the prior Form 990 or 990-EZ?		ervices during the year (which were not listed on	┌ Yes ┌ No
_	If "Yes," describe these new ser				
3	Did the organization cease cond services?		it changes in how it cond	ducts any program	┌ Yes ┌ No
4	Describe the exempt purpose ac Section 501(c)(3) and (4) organ others, the total expenses, and i	hievements for each of t izations and 4947(a)(1)	trusts are required to re	port the amount of grants a	
4a	(Code) (Expe Anabaptist Foundation makes grants a Anabaptist Foundation made grants to	and allocations to exempt orga	niztions including churches an	881,503) (Revenue \$ d other publicly supported organiz) ations During FY 08-09
4b	(Code) (Expe Loan Program AF makes loans to Anal mortgages As of its current year end A maintaining their religious beliefs and	paptist individuals businesses a F had 53 outstanding loans in	and charitable organizations Lo		
4c	(Code) (Expe	nses \$	ıncludıng grants of \$) (Revenue \$)
4d	Other program services (Desc (Expenses \$	ribe in Schedule O) including grants o	of \$) (Revenue \$	١
4e	Total program service expense		<u> </u>		,

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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🤨	2	Yes	
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		N o
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Νο
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	Yes	
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
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		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
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	Yes	
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	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		N o
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		No
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		No
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		N o
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? <i>If</i> "Yes," complete Schedule F, Part III	16		N o
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>	17		N o
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		N o
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
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	Yes	
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		Νο
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		No
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		No
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		No
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		N o
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	Yes	
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		No

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			
а	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			
		28a		Νo
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νo
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		Νo
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νo
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
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		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		Νo
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	Yes	
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		Νo
36	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		Νο
37	Did the organization conduct more than 5 percent 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		Νo

Pa	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 ar	nd Transmittal					
	of U.S. Information Returns. Enter -0- if not applicable						
			1a	45			
b	b Enter the number of Forms W-2G included in line 1a <i>Enter -0-</i> if not a		1b	0			
_	c Did the organization comply with backup withholding rules for reporta	L					
C	gaming (gambling) winnings to prize winners?		venc		1 c	Yes	
2a							
	Statements filed for the calendar year ending with or within the year co		2a	0			
h	b If at least one is reported in 2a, did the organization file all required for	· · · · L					
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required.				2b		
3a	a Did the organization have unrelated business gross income of \$1,000	or more during	the	ear covered by this			
	return?				3a		No
	b If "Yes," has it filed a Form 990-T for this year? If "No," provide an exp				3b		
4a	At any time during the calendar year, did the organization have an int over, a financial account in a foreign country (such as a bank account						
	account)?		•	· · · ·	4a		Νo
b	b If "Yes," enter the name of the foreign country						
	See the instructions for exceptions and filing requirements for Form T	D F 90-22.1, Rep	ort of	Foreign Bank and			
	Financial Accounts.						
5a	, , ,			·	5a		No
b	b Did any taxable party notify the organization that it was or is a party to	o a prohibited ta	axsh	elter transaction?	5b		Νο
c	${f c}$ If "Yes," to 5a or 5b, did the organization file Form 8886-T, <code>Disclosure</code>	e by Tax-Exempt	Entit	y Regarding Prohibited	_		
_	Tax Shelter Transaction?		•		5c		
6a	,				6a		No
D	b If "Yes," did the organization include with every solicitation an expression were not tax deductible?	s statement tha	t suc	n contributions or giπs	6b		
7	Organizations that may receive deductible contributions under section 17	70(c).					
а	a Did the organization provide goods or services in exchange for any qu	ııd pro quo contr	ıbutı	on of \$75 or	7a		Νo
	more?						
	b If "Yes," did the organization notify the donor of the value of the goods	-			7b		
С	c Did the organization sell, exchange, or otherwise dispose of tangible file Form 8282?			-	7c	Yes	
d	d If "Yes," indicate the number of Forms 8282 filed during the year .	1	7d			100	
_	a 17 res, marcate the number of rolling of the adding the year 1		<i>,</i>				
е	e Did the organization, during the year, receive any funds, directly or in				_		
	benefit contract?				7e		No No
f	, , , , , , , , , , , , , , , , , , , ,				7f		N o
g				·	7g		
n	h For contributions of cars, boats, airplanes, and other vehicles, did the required?	organization ille	e a r		7h		
8	Section $501(c)(3)$ and other sponsoring organizations maintaining donor α	advised funds an	d sec	tion 509(a)(3)			
	supporting organizations. Did the supporting organization, or a fund ma excess business holdings at any time during the	intained by a sp	onsc	oring organization, have			
	year?				8		Νο
9	Section $501(c)(3)$ and other sponsoring organizations maintaining donor a	advised funds.					
а	a Did the organization make any taxable distributions under section 49	66?			9a		Νo
b	b Did the organization make a distribution to a donor, donor advisor, or	related person?			9b		Νο
10	Section 501(c)(7) organizations. Enter						
а	a Initiation fees and capital contributions included on Part VIII, line 12	2 [:	10a				
b	b Gross receipts, included on Form 990, Part VIII, line 12, for public u	se of club	10b				
	facilities						
11	Section 501(c)(12) organizations Enter						
а	a Gross income from members or shareholders						
		-	11a				
b	b Gross income from other sources (Do not net amounts due or paid to against amounts due or received from them)		11b				
	·	L	I				
	2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization file	_	lieu o i	f Form 1041?	12a		
b	b If "Yes," enter the amount of tax-exempt interest received or accrued year	I during the	12b				
	/ = =-:						

6

8

9a

Section A. Governing Body and Management

b Enter the number of voting members that are independent . .

No

Νo

Νo

Νo

Νo

Νo

Νo

Νo

Yes

4

2

3

4

5

6

7a

7Ь

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

	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below	, describe the circumstances	5,
	processes, or changes in Schedule O. See instructions.		
1a	Enter the number of voting members of the governing body	1a	1(

1b

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?
3	Did the organization delegate control over management duties customarily performed by or under the direct

filed?	
Did the organization make any significant changes to its organizational documents since the prior Form 990	was
supervision of officers, directors or trustees, or key employees to a management company or other person?	•

	filed?		
5	Did the organization become aware during the year of a material diversion of the organization's assets?		

Does the organization have members or stockholders /
Does the organization have members, stockholders, or other persons who may elect one or more members of the
governing hody?

Ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	•
	Did the organization contemporaneously document the meetings held or written actions undertaken during the	ıe

	Did the organization of	·OIIC	empor	aneo	usiy	uoc	unie	 C 1111	etiii	ys ne	iu oi	VVIICE	enac	 o un	ueit	arei	ii uui	ilig ti	16
	year by the following																		
2	the governing hody?																		

Ь	each committee with authority to act on behalf of the governing body?		•		•			
	Does the organization have local chapters, branches, or affiliates? .							

Ь	If "Yes," does the organization have written policies and procedures governing the activities of su	ch	cha	pter	·s,
	affiliates, and branches to ensure their operations are consistent with those of the organization?				

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

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

8a	Yes	
8b	Yes	
9a		Νo
9b		
10	Yes	
11		Νο

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
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	Yes	
13	Does the organization have a written whistleblower policy?	13		Νo
14	Does the organization have a written document retention and destruction policy?	14		Νo
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
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		Νο
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
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website. I another's website.
- 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. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

TIM STOLTZFUS 1245 OLD ROUTE 15 NEW COLUMBIA, PA 17856 (800) 653-9817

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) and key employees 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, or 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 r	ot compens	ate any	offic	er, d	lirec	tor, tru	uste	or key employee		
		Posit tl	(C non (hat a	chec		I				(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
Kenneth Burkholder , Chairman	1	Х						0	0	0
Dennis Martin , Vice Chairman	1	Х						0	569	0
Tım Thomas , Board Treasurer	6	Х		Х				0	3,400	0
Merle Burkholder , Secretary	1	X						0	400	0
Dwayne Borkholder , At large	1	Х						0	0	0
Richard Shank , At large	1	X						0	28,266	0
Amos Kauffman , At large	1	Х						0	100	0
David Martin , At large	1	Х						0	2,773	0
John Stoltzfus , At large	1	Х						0	100	0
Marvın Weaver , At large	1	X						0	33	0
Merle Herr , Executive Officer	2			Х				3,841	38,941	0
Tım Stoltzfus , Operations Officer	6			Х				2,543	35,716	0
Richie Lauer , Foundation Officer	15			Х				23,081	1,155	0
										_

Part VII Continued

		Posi			у)			(D)	(E)	(F) Estimated
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	amount of other compensation from the organization and related organizations
			ļ							
1b Total						•	•	29,465	111,453	0

Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►0

	_		res	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	3		Νo
4	For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If</i> "Yes," complete Schedule J for such			
	ındıvıdual	4		Νo
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	5		Νo

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
	10000	

Page **9**

Part VIII

Statement of Revenue

					(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
	1a	Federated can	npaigns 1a			Revende		312, 313, 01 314
まま	ь	Membership d	ues					
E E			1b					
S, Ç	С	Fundraising ev	vents 1c					
無	d	Related organ	ızatıons1d					
ΨŒ	e	Government gran	nts (contributions) 1e					
Contributions, gifts, grants and other similar amounts	f		tions, gifts, grants, and not included above	1,290,051				
불풍	g	Noncach cont	1f rıbutıons ıncluded ın					
ŠΞ	9		114,021					
Q 16	h		es 1a-1f)		1,290,051			
				Business Code				
e E	2a	Loan Program Int	erest	900,099	261,799	261,799		
Yen	ь	Loan Origination		900,099	15,658	15,658		
<u>æ</u>	c	Affiliated NPO Re		532,000	13,173	13,173		
921	d	Armated W o Ke		332,000	13,173	13,173		
<u>.</u>								
Ë	e							
Program Serwce Revenue	f	All other prog	ram service revenue					
å	g	Total. Add line ▶ \$ 290,630	es 2a-2f					
	3	Investment ın	come (including divi	dends, interest				
		othersımılara	amounts)	[12,241			12,241
	4	Income from inve	estment of tax-exempt be	ond proceeds				
	1		,	į.				
	5	Royalties .						
			(ı) Real	(II) Personal				
	6a	Gross Rents						
	Ь	Less rental expenses						
	С	Rental income or (loss)						
	d	, ,	ome or (loss)					
			(1) Socurition	(u) O thor				
	7a	Gross amount	(ı) Securities 1,514	(II) O ther 259,929				
	"	from sales of assets other than inventory	_,					
	ь	Less cost or other basis and	1,487	259,908				
	c	sales expenses Gain or (loss)	27	21				
	d	Net gain or (lo			48			48
				. ▶				
	8a	events (not ın	from fundraising cluding					
Other Revenue		\$ of contribution	 ns reported on line					
क ≳		1c) See Part	IV, line 18 <i>le G if total exceeds</i>					
ď		\$15,000						
ē	ь	Less directe	xpensesb					
₹	С	Net income or	(loss) from fundrais	ing events				
	9a	Gross income	from gaming	▶				
		activities See	part IV , line 19					
		Complete Schel						
		CACCCUS \$15,00	a					
	ь	Less directe	xpensesb					
	С		(loss) from gaming a					
				•				
	10a	Gross sales of returns and al	finventory, less lowances					
			а					
	ь	Less cost of	goods sold b					
	С	Net income or	(loss) from sales of	inventory				
		Mıscellaneou	s Revenue	Business Code				
	11a							
	ь							
	С							
		A II - 4.1						
	d	All other reve						
	12		es 11a-11d		1,592,970	290,630	0	12,289
	12	8c,	. Add lines 1h, 2g, 3		1,372,370	270,030	0	12,209

Form 990 (2008) Part IX Statement of Functional Expenses

1	ot include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to governments and organizations	(A) Total expenses	(B) Program service	(C)	(D)
	Crants and other assistance to governments and organizations	, i	expenses	Management and general expenses	Fundraising expenses
	in the U.S. See Part IV, line 21	881,503	881,503		
	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
	Compensation of current officers, directors, trustees, and key employees	32,322	12,447	13,194	6,681
	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				
	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal	700		700	
с	Accounting	11,739	1,531	9,902	306
	Lobbying		_,	-,	
	Professional fundraising See Part IV, line 17				
	Investment management fees				
	Other	7,644	3,799	3,085	760
_		,	3,799	3,063	
	Advertising and promotion	100	11 200	12.517	100
	Office expenses	31,793	11,200	12,547	8,046
	Information technology	3,945	3,314		631
	Royalties				
	Occupancy	4,486	2,243	1,794	449
	Travel	6,797		557	6,240
	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings				
20	Interest	201,125	201,125		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,736	2,844	714	178
23	Insurance				
	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)				
	Provision for loan losses	6,053	6,053		
	Mortgage Filings	702	702		
c	1101119490 1 1111190	,02	,02		
d					
e d					
d					
e					
e	A.H. H				
	All other expenses				
	Total functional expenses. Add lines 1 through 24f	1,192,645	1,126,761	42,493	23,391
	Joint Costs. Check 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) of year
	1	Cash—non-interest-bearing			Beginning or year	1	Liid	1,898,030
	2	Savings and temporary cash investments			734,639			791,614
	3	Pledges and grants receivable, net			,	3		
	4	Accounts receivable, net	· · ·		93			697
	5	Receivables from current and former officers, directors, trustees, other related parties Complete Part II of Schedule L	key er	mployees or		5		77,262
	6	Receivables from other disqualified persons (as defined under sec persons described in section 4958(c)(3)(B) Complete Part II of So	tion 4	958(f)(1)) and		6		322,806
	7	Notes and loans receivable, net			3,975,719	7		6,109,196
	8	Inventories for sale or use				8		
2	9	Prepaid expenses and deferred charges				9		
Assets	10a	Land, buildings, and equipment cost basis	_{10a}	134,905				
•	ь	Less accumulated depreciation <i>Complete Part VI of Schedule D</i>	10b	4,712	8,784	10c		130,193
	11	Investments—publicly traded securities				11		
	12	Investments—other securities See Part IV, line 11 <i>Complete Part Schedule D</i>	t VII o	f	150,668	12		116,748
	13	Investments—program-related See Part IV, line 11 $\it Complete Pair of Schedule D$.			13			
	14	Intangible assets		14				
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D	5,506	15		13,493		
	16	Total assets. Add lines 1 through 15 (must equal line 34)			4,875,409	16		9,460,039
	17	Accounts payable and accrued expenses .	11,255	17		8,933		
	18	Grants payable		18				
	19	Deferred revenue		19				
10	20	Tax-exempt bond liabilities			20			
ě	21	Escrow account liability Complete Part IV of Schedule D		21				
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
		persons Complete Part II of Schedule L		•		22		
	23	Secured mortgages and notes payable to unrelated third parties			23			
	24	Unsecured notes and loans payable		24				
	25	Other liabilities Complete Part X of Schedule D	4,079,992	25		8,146,460		
	26	Total liabilities. Add lines 17 through 25			4,091,247	26		8,155,393
ices		Organizations that follow SFAS 117, check here ▶ and complete through 29, and lines 33 and 34.	ete line	es 27				
Balance	27	Unrestricted net assets			519,573	27		805,533
	28	Temporarily restricted net assets		46,320	28		34,535	
Fund	29	Permanently restricted net assets		218,269	29		464,578	
or Fu		Organizations that do not follow SFAS 117, check here ► and lines 30 through 34.	lete					
	30	Capital stock or trust principal, or current funds			30			
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .			31			
	32	Retained earnings, endowment, accumulated income, or other fun		32				
Net	33	Total net assets or fund balances	784,162	33		1,304,646		
_	34	Total liabilities and net assets/fund balances			4,875,409	34		9,460,039
Pa	rt XI	Financial Statements and Reporting					Ves	No

Dart YT	Financial	Statements	and Reporting

1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
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?	2c		Νο
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		Νο
b	If "Yes," did the organization undergo the required audit or audits?	3b		

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

2008

Open to Public
Inspection

Anaba	ptist Fo	undation							,				
- B-		D	f - D - - C	h - '1 - Cl - 1 - /1 - h		111 -			-318739				
	rt I			harity Status (to be co ation because it is (Please					Instruct	ions)			
	Ji yaiii.			ation because it is (Flease nurches, or association of ch					'A \/;\				
1	<u>'</u>	•		•			Section	170(D)(1)(A)(1).				
2	<u> </u>	A school described in Section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in Section 170(b)(1)(A)(iii). (Attach Schedule H)											
3	Ļ	•	·				-		• •		•		
4	ı										nter the		
_	_	hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in											
5	ı				universit	y ownea o	roperated	by a gove	ernmentai	unit desc	ribed in		
_	_			(Complete Part II)			470	/I \ / 4 \ / 8 \ \					
6		•	· -	overnment or governmental									
7				ally receives a substantial p p)(1)(A)(vi) (Complete Par		support fro	om a gove	rnmental u	init or fron	n the gene	eral public		
8	Г		-	ped in Section 170(b)(1)(A)	•	nplete Par	tII)						
9	Ė		•	ally receives (1) more than		•	•	ontribution	ıs. membe	rship fees	s. and aross		
	•			lated to its exempt functions									
		•		estment income and unrelate	•		•	,	•	•			
			-	on after June 30, 1975 See			-			,			
10	Г		=	and operated exclusively to					•	ee instruc	tions)		
11	Ė	=	=		-		-				•		
	•	-	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 T	• •				-		d		III - Other		
е	ı		- '	rtify that the organization is agers and other than one or			-			-	•		
		section 50		agers and other than one or	more publ	псту зирр	orteu orga	11124110115	aescribeu	III Section	1303(a)(1) 01		
f				d a written determination fro	m the IRS	that it is	a Type I,	Type II o	r Type III	supportir	ng organization,		
		check this									Г		
g		Since Augu following pe		as the organization accepted	d any gift	or contrib	ution from	any of the	!				
				r indirectly controls, either a	alone or to	gether wi	th persons	describe	d ın (ıı)		Yes No		
			·-	ng body of the the supported		_	•		` ,	11g			
				erson described in (i) above	=					11g(
			•	ty of a person described in (bove?				11g(
h				nation about the organizatio			supports				<u> </u>		
				•	-	•							
	(i) Na	ame of	(ii) EIN	(iii) Type of organization	(iv) I	s the	(v) Did y	ou notify	(vi) I	s the	(vii) A mount of		
		orted		(described on lines 1-9		atıon ın		nızatıon		ation in	support?		
	Orgar	ıızatıon		above or IRC section		listed in) of your		rganized			
				(See Instructions))	your go	verning nent?	supp	ort	In the	US?			
					Yes	No	Yes	No	Yes	No	-		
					1.03		1.53						
										 	 		
-										<u> </u>	 		
											 		
										 	-		

Total

Support Schedule for Organizations Described in IRC 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.)

_	(Complete only if you chec	keu tile box t	JII IIIIE 3, 7, 01	o or Part 1.)				
	ublic Support		1 (1) 2005	() 2006	(1) 2007		2000	(6) =
	endar 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")		401,665	2,099,987	1,123,288		1,290,051	4,914,991
2	Tax revenues levied for the organization's							
2	benefit and either paid to or expended on							
	ıts behalf							
3	The value of services or facilities							
	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3		401,665	2,099,987	1,123,288		1,290,051	4,914,991
5	The portion of total contribution by each							
	person (other than a government unit or							
	publicly supported organization) included							
	on line 1 that exceed 2% of the amount							
	shown on line 11, column							
6	(f) Public Support subtract line 5 from line							
U	4							4,914,991
	otal Support	1	1	I	I			
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
7	A mounts from line 4	(4) 200	1,185	2,099,987	1,123,288	(-)	1,290,051	4,914,991
8	Gross income from interest, dividends,		'	, ,	, ,		, ,	, ,
•	payments received on securities loans,		4.405	22.244	24.067		25 444	00 007
	rents, royalties and income from similar		1,185	32,341	31,067		25,414	90,007
	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)		+					5,004,998
11	Total Support (Add lines 7 through 10)	/C				1		
12	Gross receipts from related activities, etc					12		639,753
13	First Five Years. If the Form 990 is for the	organızatıon's f	irst, second, thir	d, fourth, or fifth	tax year as a 5	01(c)(. —
	organization, check this box and stop here							► ▽
	omputation of Public Support Perc							
14	Public Support Percentage for 2008 (line 6	column (f) divi	ded by line 11 co	olumn (f))		14		0 %
15	Public Support Percentage for 2007 Sched	ule A , Part IV -	A, line 26f			15		
16a	33 1/3% Test - 2008. If the organization di		•		3 1/3% or more,	check	this box	
	and stop here. The organization qualifies as		,					► □
b	33 1/3% Test - 2007. If the organization di			•	l5 is 33 1/3% o	r more	, check th	- -
	box and stop here. The organization qualifi							▶
17a	'a 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 circums							ow the ►
h	10% Facts and Circumstances Test - 2007.							•
	more, and if the organization meets the "fac							
	the organization meets the "facts and circu							
18	Private Foundation. If the organization did		-	•			-	•
	instructions		,	•	•			▶ □

Pa	Support Schedule for On (Complete only if you ched				(2)		
	ction A. Public Support		_	,			
Cale	ndar 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						
2	include any "unusual grants ") Gross receipts from admissions,						
2	merchandise sold or services performed,						
	or facilities furnished in any activity that						
	is related to the organization's tax-						
	exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business under						
	section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total Add lines 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of 1% of						
	the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						
С	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
_	line 6)						
То	tal Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts 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 30 June, 1975		+				
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income Do not include gain or loss						
	from the sale of capital assets						
	(Explain in Part IV)						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and stop here						▶ □
	manufaction of Dublic Compact Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumin (1))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
		D					
Co	mputation of Investment Income Investment Income Percentage for 2008 (ne 13 column /f	<u> </u>	17	
	-			-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	H		18	

19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008

▶□

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

Schedule A (Form 990 or 990-EZ) 2008

Name of organization

Employer identification number

Anabaptist Foundation 75-3187397 Part II Noncash Property (see Instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received (see instructions) Part I 10 Real Estate \$ _____ 112,533 2009-02-20 (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received (see instructions) Part I (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received (see instructions) Part I (a) No. (c) (d) from FMV (or estimate) Description of noncash property given Date received (see instructions) Part I (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received (see instructions) Part I

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. To be completed by organizations that

Name of the organization **Employer identification number**

Supplemental Financial Statements

answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

AllaL	raptist i outlination		75-3187397
Pai	rt I Organizations Maintaining Donor Ac		inds or Accounts. Complete if the
	organization answered "Yes" to Form 99	0, Part IV, line 6. (a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	23	1
2	Aggregate Contributions to (during year)	935,068	220
3	Aggregate Grants from (during year)	586,985	964
4	Aggregate value at end of year	670,742	130,261
5	Did the organization inform all donors and donor advi	sors in writing that the assets held in done	<u> </u>
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben impermissible private benefit?	donor advisors in writing that grant funds efit of the donor or donor advisor or other	✓ Yes
	t II Conservation Easements. Complete		Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space	on or pleasure)	historically importantly land area
2	Complete lines 2a-2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement
	on the last day of the tax year		Held at the Find of the Year
а	Total number of conservation easements		Held at the End of the Year
b		_	2b
c	Total acreage restricted by conservation easement		2c 2c
d	Number of conservation easements on a certified hi	` ,	2d
	Number of conservation easements included in (c) a	•	
3	Number of conservation easements modified, transfe	rred, released, extinguished, or terminate	d by the organization during
	the taxable year ►		
4	Number of states where property subject to conserva	ation easement is located ►	
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		tions, and Yes No
6	Staff or volunteer hours devoted to monitoring, inspec	cting and enforcing easements during the	year ►
7	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing easements during the ye	ar ►\$
8	Does each conservation easement reported on line 2 $170(h)(4)(B)(I)$ and $170(h)(4)(B)(II)$?	(d) above satisfy the requirements of sec	tion ┌ Yes
9	In Part XIV, describe how the organization reports cobalance sheet, and include, if applicable, the text of the organization's accounting for conservation easen	he footnote to the organization's financial	• •
Part	Organizations Maintaining Collection Complete if the organization answered '		or Other Similar Assets.
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or researc	h in furtherance of public service,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	oublic exhibition, education, or research ir	•
	(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, histofollowing amounts required to be reported under SFA		r financial gain, provide the
а	Revenues included in Form 990, Part VIII, line 1		► \$

b Assets included in Form 990, Part X

Par	Organizations Maintaining Co	ollections of Art,	His	<u>tori</u>	<u>cal Treasu</u> i	res, or Othe	<u>r Similar Asse</u>	ets (co	<u> ntınued)</u>
3	Using the organization's accession and other items (check all that apply)	r records, check any	of th	e foll	owing that are	a sıgnıfıcant u	se of its collectio	n	
а	Public exhibition		d	Γ	Loan or exch	ange programs			
ь	Scholarly research		e	Γ	Other				
c	Preservation for future generations								
4	Provide a description of the organization's c Part XIV	ollections and explai	n how	v the y	further the o	rganızatıon's ex	empt purpose in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than							Yes	┌ No
Pai	rt IV Trust, Escrow and Custodial					nization answ	ered "Yes" to F	orm 9	90,
	Part IV, line 9, or reported an ai								
1a	Is the organization an agent, trustee, custon included on Form 990, Part X?			for c	ontributions o	r other assets 1		Yes	┌ No
b	If "Yes," explain why in Part XIV and compl	ete the following table	е						
							A mou	ınt	
с	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	217				Г	Yes	☐ No
b	If "Yes," explain the arrangement in Part XI								
Pa	rt V Endowment Funds. Complete	If the organization (a)Current Year		were Prior Y				NEour V	ears Back
1a	Beginning of year balance	245,062	(5)	11101	cai (c)iwa	rears back (a)	Tillee Tears back (C	. , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Jais Back
ь	Contributions	233,067							
c	Investment earnings or losses	14,838							
d	Grants or scholarships								
e	Other expenditures for facilities	4,007							
	and programs								
f	Administrative expenses	488,960							
g	End of year balance								
2	Provide the estimated percentage of the year	ar end balance held a	S						
а	Board designated or quasi-endowment 🕨								
Ь	Permanent endowment ► 95 000 %								
C	Term endowment 🕨 5 000 %								
3а	Are there endowment funds not in the posse organization by	ssion of the organiza	tion t	that a	ire held and ac	iministered for	the	Yes	No
	(i) unrelated organizations						3a(i)		No
	(ii) related organizations						3a(ii)		Νo
b	If "Yes" to 3a(11), are the related organization	·					3b		
4	Describe in Part XIV the intended uses of th								
Par	t VI Investments—Land, Building	s, and Equipmer	ıt. S						
	Description of investment) Cost or other sis (investment)	(b)Cost or other basis (other)	(c) Depreciation	(d) Bo	ook value
1a	Land					30,000	•		30,000
b	Buildings		•			95,145	1,784		93,361
c	Leasehold improvements		•						
	Equipment		•			9,760	2,928		6,832
e	Other								

130,193

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	2.	-
(a) Description of security or cateory (including name of security)	(b) Book value		d of valuation year market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other Common Stocks	88,009		F
Other Money Market Fund	28,739		F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	116,748		
Part VIII Investments—Program Related. Se	e Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value	(c) Method	d of valuation
	(=,====================================	Cost or end-of-	year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, II	ne 15.		
(a) Descri	ption		(b) Book value
Interest Receivable			13,493
Table (Column (b) about a surel Same 2000 Bart V and (B) bare	*E.\		12.402
Part X Other Liabilities. See Form 990, Part X, col.(B) line			13,493
(a) Description of Liability	(b) A mount		
Federal Income Taxes	(=,		
Deposit under Investment Mgmt	8,146,460		
	, ,		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	8,146,460		

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,592,970
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,192,645
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	400,325
4	Net unrealized gains (losses) on investments	4	-39,786
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-39,786
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	360,539
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	er R	eturn
1	Total revenue, gains, and other support per audited financial		1,553,184
	statements	1	
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments		
Ь	Donated services and use of facilities		
С.	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	-39,786
3	Subtract line 2e from line 1	3	1,592,970
4	A mounts 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		
Ь	Other (Describe in Part XIV)	_	
с -	Add lines 4a and 4b	4c	1 502 070
5 Date	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5 Per	1,592,970
1	Total expenses and losses per audited financial statements	1	1,192,645
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		=
а	Donated services and use of facilities		
ь	Prior year adjustments	1	
c	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,192,645
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	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	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	1,192,645
Pa	rt XIV Supplemental Information		

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

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, 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

Ident if ier	Return Reference	Explanation
Endowment funds intended uses Part V line 4		The purpose of Anabaptist Foundations endowment fund program is to provide operational support to designated exempt organizations At year end there were seven different endowment funds Beneficiaries included private Christian schools and other Christian based exempt organizations
02 Footnote for uncertain tax position under FIN 48 Part X		Management has deferred implementation of accounting for uncertain tax positions Accounting for uncertain tax positions must be implemented for fiscal years beginning after December 15 2008 Since implementation has been deferred management continues to utilize its prior policy of accounting for these positions as it would account of any loss contingency. Disclosure is not required of a loss contingency involving an unasserted claim or assessment when there has been no manifestation by a potential claimant of an awareness of a possible claim or assessment unless it is considered probable that a claim will be asserted and there is a reasonable possibility that the outcome will be unfavorable Using this guidance as of June 30 2009 AF has no uncertain tax positions that qualify for either recognition or disclosure in the financial statements
	·	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

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

OMB No 1545-0047

2008

DLN: 93493112005090

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

(Form 990)

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

Inspect ion Employer identification number

A nabaptist Foundation						75-3187397	
Part I General Information Inf		nts and Assistance		ance the grantees' also	ubility for the grants or a	ssistance and	
the selection criteria use Describe in Part IV the o	d to award the gra	nts or assistance?			· · · · · · · · · ·		√ Yes
Form 990, Part I Part IV and Sch	IV, line 21 for ai edule I-1 if addi	ny recipient that rec tional space is	eived more than \$5,0	000. Check this box	tes. Complete if the confirmation one recipient rec	eived more than \$5,	
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance
See Additional Data Table							
2 Enter total number of seconganizations3 Enter total number of other contents.						.	29
For Paperwork Reduction Act Not				Cat No 50055			hedule I (Form 990) 2008

	•						
Part III	Grants and Other Assista	nce 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) A mount of cash grant	(d)A mount 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. See Additional Data Table

See Additional Data Table		
Ident if ier	Return Reference	Explanation
Monitoring procedures (Part I, line 2)		When a disbursement request is considered, management confirns the eligibility status of the recipient organization by either confirming it is a church or receiving from the prospective recipient organization a copy of their IRS determination letter Recipient organizations are required to provide, on request, copies of their audited financial statements. Also, management reviews public relations materials and websites of recipient organizations to confirm that their activities are in line with the organizations' stated purposes. Churches are exempt from the requirement to provide, on request, audited financial statements.
Supplemental information (Part IV , additional)		The purpose of the Bald Eagle Wilderness Boys Camp grants were to provide for the purchase of real estate and general operations. The purpose of the Christian Aid Ministries grants were to provide for special organization programs and general operations. The purpose of the operations of the purpose of the Heralds of Hope Inc. grants were to provide for Bibles, overseas broadcasting, and general operations. The purpose of the Hope International grants were to provide for microloan projects, feasibility studies, and general operations. The purpose of the Institute For Global Opportunities grants were to provide for program activities and general operations. The purpose of the Wybrook Missionay Baptist Church grants wre to provide for Bible studies and general operations. The Lower West Millcreek Amish Church District and NW Groffdale Amish Church District did not have EIN's available for disclosure.

Software ID:

Software Version:

EIN: 75-3187397

Name: Anabaptist Foundation

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(h) Purpose of grant or assistance
A nabaptist Financial 1245 Old Route 15 New Columbia, PA 17856	32-0158554	501 c3	42,000			O perations
Bald Eagle Wilderness Boys Cam1077 Wilderness Trail Mill Hall, PA 17751	23-2703530	501 c3	252,507			See Part IV
Bibles For The WorldPO Box 49759 Colorado Springs, CO 80949	36-2434228	501 c3	20,406			O perations
BPN USA16 Meadow Lane Smoketown, PA 17576	20-1378516	501 c3	7,700			O perations
Christian Aid MinistriesPO Box 360 Berlin,OH 44610	34-1344364	501 c3	100,350			See Part IV
Ephrata Christian Fellowship Box 399 Denver,PA 17517	23-3081138	501 c3	9,900			O pertions
Gspl Exprs Evng Team Mnstr IncPO Box 217 Lynn,NC 28750	23-2306606	501 c3	5,323			O perations
Gospel SunrisePO Box 99 Dayton, VA 22821	52-1216561	501 c3	17,000			See Part IV
Groffdale Amish Church Distric440 Peach Road Ephrata,PA 17522	20-1077398	501 c3	22,559			Operations
Heartcry Missionary Society In1915 Avalon Avenue Muscle Shoals, AL 35661	20-4593210	501 c3	10,000			O perations

Form 990,Schedule I,	Part II, Gran	its and Other As	sistance to Gov	ernments and O	rganizations in	the United States	į
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Heralds of Hope IncPO Box 3 Breezewood, PA 15533	23-6434992	501 c3	17,000				See Part IV
Hope International227 Granite Run Drive Lancaster,PA 17601	23-2836648	501 c3	60,098				See Part IV
Inst For Global Opportunities198 West Lexington Road Lititz, PA 17543	20-2313547	501 c3	11,975				See Part IV
Lebanon Valley Mennonite Churc3 High Street Myerstown, PA 17067	23-2189328	501 c3	19,000				O perations
Life Ministries250 Meadow Lane Conestoga,PA 17516	23-2488042	501 c3	9,103				O perations
Living Hope Christian Fellowsh705 Red Run Road New Holland,PA 17557	23-0906608	501 c3	8,000				Deacon Fund
Living Hope Intl MinistriesPO Box 76 Arthur,IL 61911	41-2229571	501 c3	6,000				O perations
Lower W Millcreek Amish Ch Dst930 Musser School Road Gordonville, PA 17529		501 c3	6,400				O perations
Marietta Community Fellowship1125 River Road Marietta,PA 17547	23-2228998	501 c3	5,500				O perations
Mennonite Air Missions 140 Rothsville Station Road Lititz, PA 17543	36-3913502	501 c3	10,000				O perations

Form 990,Schedule I,	Part II, Gra	nts and Other As	sistance to Gov	ernments and O	rganizations in	the United States	j.
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NW Groffdale Amish Church462 Voganville Road New Holland, PA 17557		501 c3	7,000				O perations
Olive Branch Mennonite Mission2486 Lebanon Road Manheim, PA 17545	23-2593407	501 c3	11,000				O perations
Teen Challenge Training CenterPO Box 98 Rehrersburg, PA 19550	23-1695361	501 c3	15,594				O perations
Times Square Church 1657 Broaddway 4th Floor New York, NY 10019	13-4038717	501 c3	13,654				O perations
The Voice of the Martyrs Inc200 SE Frank Phillips Blvd Bartlesville, OK 74003	73-1395057	501 c3	44,806				O perations
Water Street Ministries 210 South Prince Street Lancaster, PA 17604	23-6004676	501 c3	7,864				O perations
World Challenge IncPO Box 260 Lindale,TX 75771	23-7249005	501 c3	40,412				O perations
Wyebrook Missionary Baptist62 New Road Elverson,PA 19520	23-2517273	501 c3	10,000				See Part IV
Ohio Wilderness Boys Camp44642 Zerger Quarry Road Summerfield,OH 43788	26-0472588	501 c3	31,000				O perations

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493112005090

Schedule L

(Form 990 or 990-EZ)

Transactions with Interested Persons

2008

2008

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization Anabaptist Foundation							n ploy		ntificat	ion n	umber	
Part I Excess Benefit Transac To be completed by organization						4) organiz	ation	ıs on	ly).	, Part	V , lıne	40b
1 (a) Name of disqualifie	d person			(h) Des	crinti	on of transa	ction			(c) Corre	ected?
1 (a) Name of alsquame	и регооп			(b) Des	СПРСК	JII UI LIAIISA	Ction				Yes	No
3 Fatantha												
2 Enter the amount of tax imposed on section 4958	· · ·	zation mana	agers or a	is qualified pers	ons d	uring the ye	earun	laer F:	\$			
3 Enter the amount of tax, if any, on li		•		organization .				•	\$			
Part II Loans to and/or From To be completed by organize				orm 990 Part	TV lu	ne 26 or Fo	rm 90	n-F7	7 Part'	V lın	e 38a	
To be completed by organize			163 0111	orm 550, r are	<u> </u>	16 20, 01 1 0		70 L2	(f			
(a) Name of interested person and purpose	(b) Loan from th organizat	ne	` '	jinal principal amount	(d) B	(d) Balance due		In ult?			agree	ritten ment?
	То	From						No	Yes	No	Yes	No
Timothy R Stoltzfus Home Mortgage		X		90,000		77,262		Νo	Yes		Yes	
Limestone Acres Business		X		350,000		322,806		Νo	Yes		Yes	
											+	-
		<u> </u>		. 🕨 \$		400,068						
Part III Grants or Assistance E To be completed by orga		_			90. P	art IV. lın	e 27.					
(a) Name of interested person		Relationsh	ıp betweeı	n ınterested pe					nt or tvi	ne of	assistai	nce
,		and	d the orga	nızatıon		+ (-,			, ,			
Part IV Business Transactions To be completed by orga					90, F	art IV, lın	e 28a	a, 28	b, or 2	28c.		
(a) Name of interested person	(b) betwe	Relationsh een interest son and th	ıp ted	(c) A mount of	İ	(d) Descri			•		(e) Shai organiza reveni	ition's
		ganızatıon	I .								Yes	No
					-					\dashv		
					\dashv					\dashv		

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493112005090

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury

Anabaptist Foundation

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

Non-Cash Contributions

Attach to Form 990 Internal Revenue Service Name of the organization

Employer identification number

75-3187397

Pa	TTT Types of Property							
		(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d Method of do reven	etermı	nıng	
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 .	X	1	1,488	Market Value			
10	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous .							
13	Qualified conservation contribution (historic structures)							
14	Q ualified conservation contribution (other)							
15	Real estate—Residential .							
16	Real estate—Commercial .	. <u>X</u>	1	112,533	Fair Value			
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxıdermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts	-						
25	Other (describe)							
26	Other (describe)							
27	Other (describe)							
28	Other (describe)							
29	Number of Forms 8283 receive which the organization comple Acknowledgement		<u>-</u> .	ar for contributions for	29			
	<u>, </u>					ļ	Yes	No
30a	During the year, did the organi hold for at least three years from the date							
	for the entire holding period?					30a		No
h	If "Yes", describe the arrange					30a		
31	Does the organization have a q			review of any non-standard	contributions?	31		Νo
32a	Does the organization hire or u	ise third part	ies or related organizations	to solicit, process, or sell i	non-cash			
	contributions?					32a	Yes	
	If "Yes", describe in Part II	ert roughuss	in Column (a) for a tuna of	property for which Calumn 1-) IC			
33	If the organization did not repo checked, describe in Part II	it revenues i	in Column (c) for a type of p	hoperty for willen Column (a	1) 13			
	checked, describe in Fait II					ldot		

Part II Supplemental Infor	mation. Complete this part to priplete this part for any additional	ovide the information required by Part I, lines 30b,
Identifier	ReturnReference	Explanation
Identinei		Schedule M Column B Disclosure The numbers listed in column b represent the number of contributions during the year Schedule M Part I Line 32b Anabaptist Foundation uses the services of various third parties to assit in selling donated noncash assets Third parties include a securites broker for liquidation of publicly traded securites and real estate agents that assist in finding buyers for donated real estate

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

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

DLN: 93493112005090

Inspection

Name of the organization Anabaptist Foundation

SCHEDULE 0

Department of the Treasury

Internal Revenue Service

(Form 990)

Employer identification number

75-3187397

ldentifier	Return Reference	Explanation
01 Form 990 governing body review (Part VI, line 10)		AFs CFO CEO Executive Officer and Operationss Officer review Form 990 for accuracy prior to its filing with the IRS

ldentifier	Return Reference	Explanation
02 Conflict of interest policy compliance (Part VI, line 12c)		Anabaptist Foundations governing board adopted a conflict of interest policy in June 2005 The policy covers all governing board members principal officers and members of any committees with governing board delegated powers it also covers interests in related business entities and family immbers of the aforemention individuals. The following are pertinent provision of Foundations policy 1 Duty to disclose – in connection with any actual or possible conflict of interest a covered person must disclose the existence of the financial interest and be given opportunity to disclose all material facts to the directors and members of committees with governing board delegated powers considering the proposed transaction or arrangement 2 Conflict of interest determination - After disclosure of the financial interest and all material facts and after any discussion with the covered person heshes shall leave the governing board or committee members shall decide if a conflict of interest is discussed and voted upon The remaining board or committee members shall decide if a conflict of interest sexists 3 Addressing conflict of interests. A covered person may make a presentation at the governing board or committee members of and vote on the transaction or arrangement involving a possible conflict of interest. The chairperson of the governing board or committee to investigate alternatives to the proposed transaction or arrangement After exercising due diligence the governing board or committee to investigate alternatives to the proposed transaction or arrangement After exercising due diligence the governing board or committee to investigate alternatives to the proposed transaction or arrangement is in the conflict of interest if such a more advantageous transaction or arrangement from or advantageous transaction or arrangement is not reasonable under the circumstances not producing a conflict of interest the governing board or committee shall determine by a majority vote of the disinterest directors whether the transaction or arra

ldentifier	Return Reference	Explanation
03 CEO, executive director, top management comp (Part VI, line 15a)		The compensation of the Executive Director is reviewed annually by the governing board Comparative and other data is used to determine the proposed level of compensation The governing board approves the compensation arrangements which are documented in the board minutes

ldentifier	Return Reference	Explanation
04 Other officer or key employee compensation (Part VI, line 15b		Compensation is deremined for Foundations Operations Officer and other Executive Officer following the same procedure as described for Foundations Executive Director

ldentifier	Return Reference	Explanation
05 Governing documents, etc, available to public (Part VI, line 19)		Anabaptist Foundation makes it annual audited financial statements and other governing doucments such as its conflict of interest policy by laws and articles of incorporation available upon request. These documents may also be inspected at Foundations business office located in New Columbia PA during normal business hours.

ldentifier	Return Reference	Explanation
06 Audited by an independent accountant (Part XI, line 2b)		The governing board oversees the selection of the independent accountant and the review of the audited financial statements

ldentifier	Return Reference	Explanation
07 General explanation attachment		Reconciliation of ending net assets Net assets beginning of year 784162 Current year change in net assets per Form 990 400325 Less unrealized losses -39786 Restatement to beginning net assets 159945

DLN: 93493112005090

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 See separate instructions.

Name of the organization Anabaptist Foundation	Employer identification number					
				75-3187397		
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 Er	(E) nd-of-year assets	(F) Direct controlling entity	
Part II Identification of Related Tax-Exempt Organizat	ions		_	_		
(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 stati (if section 501(c)(3	(F) us Direct controlling 3)) entity	
Anabaptist Financial						
1245 Old Route 15 New Columbia, PA17856 32-0158554	Anabaptist community loan prg	PA	501 c3	9	NA	
	•			-		

Part III Identification of			(C)					(H	4)		()	1)
(A) Name, address, and EIN of related organization	(B) Primary ac	tivity	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	Dispro alloca	prtionate tions?	(I) Code V—UBI amount on Box 20 of K-1	Gener mana partr	ral o ng ing ner?
								Yes	No		Yes	No
Part IV Identification of	Related Org	anizations	Taxable	as a Corporation	n or Trust							
(A) Name, address, and EIN of related	l organization	(B) Primary act	ıvıty	(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 inco	ome	Sh end-	are of Perce	H) entage ership	
Anabaptist Financial Solutions 1245 Old Route 15 New Columbia, PA17856 77-0688163		Business advis	sing	PA	NA	С Согр				0 %		

(6)

Part V	Transactions wi	th Related	Organizations
--------	-----------------	------------	---------------

Pai	Transactions with Related Organizations						
	Note. Complete line 1 if any entity is listed in Parts II, III or IV				Yes	No	
1 Du	iring the tax year, did the orgranization engage in any of the following transaction	ons with one or more related organizations listed in Parts II-	IV?				
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled en	ntity		1a		No	
b	Gift, grant, or capital contribution to other organization(s)			1b	Yes		
c	Gift, grant, or capital contribution from other organization(s)			1c		No	
d	Loans or loan guarantees to or for other organization(s)			1d		No	
e	Loans or loan guarantees by other organization(s)			1e		No	
f	Sale of assets to other organization(s)			1f		No	
g	Purchase of assets from other organization(s)			1 g		No	
h	Exchange of assets			1h		No	
i	Lease of facilities, equipment, or other assets to other organization(s)			1i	Yes		
j	Lease of facilities, equipment, or other assets from other organization(s)			1j		No	
k	Performance of services or membership or fundraising solicitations for other or	rganızatıon(s)		1k		No	
ı	Performance of services or membership or fundraising solicitations by other organization(s)						
m	Sharing of facilities, equipment, mailing lists, or other assets			1m	Yes		
n	Sharing of paid employees			1n		No	
o	Reimbursement paid to other organization for expenses			10	Yes		
р	Reimbursement paid by other organization for expenses			1р	Yes		
q	O ther transfer of cash or property to other organization(s)			1q		No	
r	O ther transfer of cash or property from other organization(s)			1r		No	
2	If the answer to any of the above is "Yes," see the instructions for information o	on who must complete this line, including covered relationsh	nips and transaction thresholds				
	(A)	(B)	(C)				
	Name of other organization(s)	Transaction type(a-r)	Amount Involved				
(1)							
(2)							
(3)							
ν-,							
(4)							
(5)							

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?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		(E) Share of end-of-year assets	(F) Disproprtionate allocations?		(G) Code V—UBI amount on Box 20 of K-1	(H) General or managing partner?	
			Yes	No		Yes	No		Yes	No						
			•	•		•		Cabadul	D / Form							