

**Return of Private Foundation  
or Section 4947(a)(1) Nonexempt Charitable Trust  
Treated as a Private Foundation**

**2008**

**Note.** The foundation may be able to use a copy of this return to satisfy state reporting requirements.

**For calendar year 2008, or tax year beginning** \_\_\_\_\_, **and ending** \_\_\_\_\_

**G** Check all that apply:  Initial return  Final return  Amended return  Address change  Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions.	Name of foundation <b>MERCY AND SHARING</b>	<b>A Employer identification number</b> 84-1323007
	Number and street (or P.O. box number if mail is not delivered to street address) Room/suite <b>201 NORTH MILL STREET, SUITE 201</b>	<b>B Telephone number</b> 970-925-6300
	City or town, state, and ZIP code <b>ASPEN, CO 81611</b>	<b>C</b> If exemption application is pending, check here <input type="checkbox"/> <b>D</b> 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>

**H** Check type of organization:  Section 501(c)(3) exempt private foundation  
 Section 4947(a)(1) nonexempt charitable trust  Other taxable private foundation

**I** Fair market value of all assets at end of year (from Part II, col. (c), line 16) **\$ 1,426,435.** (Part I, column (d) must be on cash basis.)  
**J** Accounting method:  Cash  Accrual  
 Other (specify) \_\_\_\_\_

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)				
<b>Revenue</b>				
1 Contributions, gifts, grants, etc., received	2,423,597.			
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
3 Interest on savings and temporary cash investments	13.	13.	13.	<b>STATEMENT 1</b>
4 Dividends and interest from securities	18,448.	18,448.	18,448.	<b>STATEMENT 2</b>
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	4,572.			
b Gross sales price for all assets on line 6a	907,097.			
7 Capital gain net income (from Part IV, line 2)		4,572.		
8 Net short-term capital gain			4,572.	
9 Income modifications				
10a Gross sales less returns and allowances				
b Less: Cost of goods sold				
c Gross profit or (loss)				
11 Other income	<42,609.>	0.	<42,609.>	<b>STATEMENT 3</b>
12 <b>Total.</b> Add lines 1 through 11	2,404,021.	23,033.	<19,576.>	
<b>Operating and Administrative Expenses</b>				
13 Compensation of officers, directors, trustees, etc.	0.	0.	0.	0.
14 Other employee salaries and wages	574,360.	0.	0.	574,360.
15 Pension plans, employee benefits	15,807.	0.	0.	15,807.
16a Legal fees <b>STMT 4</b>	50,390.	0.	0.	50,390.
b Accounting fees <b>STMT 5</b>	9,631.	0.	0.	9,631.
c Other professional fees <b>STMT 6</b>	150,317.	5,043.	0.	145,274.
17 Interest				
18 Taxes <b>STMT 7</b>	33,000.	0.	0.	33,000.
19 Depreciation and depletion	47,905.	0.	25,676.	
20 Occupancy	48,604.	0.	0.	48,604.
21 Travel, conferences, and meetings	212,529.	0.	0.	212,529.
22 Printing and publications	51,985.	0.	0.	51,985.
23 Other expenses <b>STMT 8</b>	1,545,710.	0.	0.	1,545,710.
24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23	2,740,238.	5,043.	25,676.	2,687,290.
25 Contributions, gifts, grants paid	16,079.			16,079.
26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	2,756,317.	5,043.	25,676.	2,703,369.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	<352,296.>			
b <b>Net investment income</b> (if negative, enter -0-)		17,990.		
c <b>Adjusted net income</b> (if negative, enter -0-)			0.	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1	Cash - non-interest-bearing		426,396.	468,922.	468,922.
	2	Savings and temporary cash investments		171,782.	45,814.	45,814.
	3	Accounts receivable				
		Less: allowance for doubtful accounts				
	4	Pledges receivable				
		Less: allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons				
	7	Other notes and loans receivable	47,600.			
		Less: allowance for doubtful accounts		47,600.	47,600.	47,600.
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments - U.S. and state government obligations	STMT 9	209,847.	26,336.	26,336.
	b	Investments - corporate stock	STMT 10	242,767.	0.	0.
	c	Investments - corporate bonds				
	11	Investments - land, buildings, and equipment: basis				
	Less: accumulated depreciation					
12	Investments - mortgage loans					
13	Investments - other	STMT 11	261,087.	137,887.	77,310.	
14	Land, buildings, and equipment: basis	905,794.				
	Less: accumulated depreciation	STMT 12	145,341.	410,584.	760,453.	
15	Other assets (describe)	STATEMENT 13)	8,668.	<60,577.>	0.	
16	<b>Total assets</b> (to be completed by all filers)		1,778,731.	1,426,435.	1,426,435.	
Liabilities	17	Accounts payable and accrued expenses		<114.>		
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable				
	22	Other liabilities (describe)				
23	<b>Total liabilities</b> (add lines 17 through 22)		<114.>	0.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted		1,778,845.	1,426,435.	
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
29	Retained earnings, accumulated income, endowment, or other funds					
30	<b>Total net assets or fund balances</b>		1,778,845.	1,426,435.		
31	<b>Total liabilities and net assets/fund balances</b>		1,778,731.	1,426,435.		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,778,845.
2	Enter amount from Part I, line 27a	2	<352,296.>
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	1,426,549.
5	Decreases not included in line 2 (itemize) <b>PRIOR YEAR RESTATEMENT OF LIABILITIES</b>	5	114.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,426,435.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	CHARLES SCHWAB SECURITIES (SEE ATTACHED)	P		
b	CHARLES SCHWAB SECURITIES (SEE ATTACHED)	P		
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a	635,693.	643,460.	<7,767.>	
b	271,404.	259,065.	12,339.	
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
a			<7,767.>	
b			12,339.	
c				
d				
e				
2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	4,572.	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8	3	4,572.	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2007	1,952,465.	724,166.	2.696157
2006	24,975.	565,135.	.044193
2005	963,380.	186,965.	5.152729
2004	579,844.	401,981.	1.442466
2003	446,096.	239,408.	1.863330
2	Total of line 1, column (d)	2	11.198875
3	Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	2.239775
4	Enter the net value of noncharitable-use assets for 2008 from Part X, line 5	4	907,614.
5	Multiply line 4 by line 3	5	2,032,851.
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	180.
7	Add lines 5 and 6	7	2,033,031.
8	Enter qualifying distributions from Part XII, line 4	8	2,703,369.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

Table with 11 rows for excise tax calculations. Includes sub-rows 6a-6d for credits and payments. Total tax due is 2.00.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns for Yes/No. Includes questions about political campaigns, unrelated business income, and state reporting.

**Part VII-A Statements Regarding Activities** (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).....	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? .....	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? .....	13	X	
Website address ► <b>HAITICHILDREN.COM</b>				
14	The books are in care of ► <b>MERCY AND SHARING</b> Telephone no. ► <b>970-925-1492</b>			
Located at ► <b>201 N. MILL STREET, SUITE #201, ASPEN, CO</b> ZIP+4 ► <b>81611</b>				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here .....	15 N/A		
and enter the amount of tax-exempt interest received or accrued during the year .....				

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
<b>1a</b>	During the year did the foundation (either directly or indirectly):		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here .....	N/A	1b
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2008? .....		1c X
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
<b>a</b>	At the end of tax year 2008, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2008? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
If "Yes," list the years ► _____, _____, _____			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement - see instructions.) .....	N/A	2b
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ► _____, _____, _____		
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If "Yes," did it have excess business holdings in 2008 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2008.) .....	N/A	3b
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? .....		4a X
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2008? .....		4b X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

**5a** During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?  Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes  No

**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Yes  No **N/A** 5b

Organizations relying on a current notice regarding disaster assistance check here  Yes  No

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  Yes  No **N/A** 7b

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No 6b

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No 7b

If you answered "Yes" to 6b, also file Form 8870.

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No

**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?  Yes  No **N/A**

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, foundation managers and their compensation.**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 17		0.	0.	0.

**2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

**Total** number of other employees paid over \$50,000 0

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)

**3 Five highest-paid independent contractors for professional services. If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services ..... 0

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 THE MERCY HOUSE ORPHANAGE, PORT-AU-PRINCE, HAITI HOME TO 43 NON-HANDICAPPED CHILDREN WHO ARE PROVIDED WITH SCHOOLING, CLOTHING AND THREE MEALS DAILY.	914,896.
2 THE MERCY HEALTH CENTER, PORT-AU-PRINCE, HAITI 40 OUTPATIENTS DAILY FOR PRE/POST-NATAL CARE. TWO DOCTORS & TWO NURSES ON STAFF WITH ADDITIONAL SUPPORT PERSONNEL.	608,128.
3 MERCY HOUSE - HOME FOR TERMINALLY ILL AND HANDICAPPED ORPHANS HOME TO OVER 60 ABANDONED CHILDREN PROVIDING 24-HOUR CARE. HOUSEMOTHERS AND PHYSIOTHERAPISTS ON STAFF.	634,310.
4 JOHN BRANCHIZIO, CITE SOLEIL & GODE SCHOOLS, PORT-AU-PRINCE CURRENTLY OVER 600 STUDENTS ENROLLED AND PROVIDED WITH DAILY MEALS AND CLEAN WATER	546,035.

**Part IX-B Summary of Program-Related Investments**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ..... 0.	

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
a	Average monthly fair market value of securities .....	1a	739,066.
b	Average of monthly cash balances .....	1b	182,370.
c	Fair market value of all other assets .....	1c	
d	<b>Total</b> (add lines 1a, b, and c) .....	1d	921,436.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) .....	1e	0.
2	Acquisition indebtedness applicable to line 1 assets .....	2	0.
3	Subtract line 2 from line 1d .....	3	921,436.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) <u>STMT 18</u> .....	4	13,822.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 .....	5	907,614.
6	<b>Minimum investment return.</b> Enter 5% of line 5 .....	6	45,381.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

1	Minimum investment return from Part X, line 6 .....	1	
2a	Tax on investment income for 2008 from Part VI, line 5 .....	2a	
b	Income tax for 2008. (This does not include the tax from Part VI.) .....	2b	
c	Add lines 2a and 2b .....	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1 .....	3	
4	Recoveries of amounts treated as qualifying distributions .....	4	
5	Add lines 3 and 4 .....	5	
6	Deduction from distributable amount (see instructions) .....	6	
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 .....	7	

**Part XII Qualifying Distributions** (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 .....	1a	2,703,369.
b	Program-related investments - total from Part IX-B .....	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes .....	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required) .....	3a	
b	Cash distribution test (attach the required schedule) .....	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 .....	4	2,703,369.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b .....	5	180.
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 .....	6	2,703,189.

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.



**Part XIII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2007	(c) 2007	(d) 2008
1 Distributable amount for 2008 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2007:				
a Enter amount for 2007 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2008:				
a From 2003				
b From 2004				
c From 2005				
d From 2006				
e From 2007				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2008 from Part XII, line 4: ▶ \$ <b>N/A</b>				
a Applied to 2007, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2008 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2008 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2007. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2008. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2009				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2003 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2009. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2004				
b Excess from 2005				
c Excess from 2006				
d Excess from 2007				
e Excess from 2008				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2008, enter the date of the ruling **03/31/94**  
**b** Check box to indicate whether the foundation is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Tax year				(e) Total
	(a) 2008	(b) 2007	(c) 2006	(d) 2005	
<b>2 a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	0.	23,665.	28,257.	9,348.	61,270.
<b>b</b> 85% of line 2a	0.	20,115.	24,018.	7,946.	52,080.
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed	2,703,369.	1,952,702.	1,746,548.	1,265,207.	7,667,826.
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities	0.	0.	0.	0.	0.
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	2,703,369.	1,952,702.	1,746,548.	1,265,207.	7,667,826.
<b>3</b> Complete 3a, b, or c for the alternative test relied upon:					
<b>a</b> "Assets" alternative test - enter:					
(1) Value of all assets					0.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0.
<b>b</b> "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					0.
<b>c</b> "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)	2,423,597.	2,268,799.	1,735,401.	1,794,817.	8,222,614.
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)	2,423,597.	2,268,799.	1,735,401.	1,794,817.	8,222,614.
(3) Largest amount of support from an exempt organization	418,546.	300,582.	273,225.	461,001.	1,453,354.
(4) Gross investment income	18,461.	34,727.	34,350.	31,419.	118,957.

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.)**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

**SEE STATEMENT 19**

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

**NONE**

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

**a** The name, address, and telephone number of the person to whom applications should be addressed:

**MERCY AND SHARING, 970-925-1492  
 201 N MILL STREET, SUITE 201, ASPEN, CO 81611**

**b** The form in which applications should be submitted and information and materials they should include:

**NO SPECIFIC FORM OF APPLICATION**

**c** Any submission deadlines:

**NO**

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

**NO**

**Part XV** Supplementary Information (continued)

**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b>				
BIGGER PICTURE MINISTRIES, PO BOX 3890, ASPEN, CO 81612	NONE	PUBLIC	MISSIONARIES	2,200.
LDS CHARITIES, CHURCH OF JESUS CHRIST OF LATTER-DAY SAINTS, 1501 NORTH CANYO	NONE	PUBLIC	MISSIONARIES	2,000.
MESA STATE COLLEGE, 1100 NORTH AVENUE, GRAND JUNCTION, CO 81501	NONE	PUBLIC	EDUCATION	5,217.
SCHOOL FOR DESIGNING A SOCIETY, 122 FRANKLIN ST., URBANA, IL 61801	NONE	PUBLIC	EDUCATION	2,400.
VARIOUS INDIVIDUALS, N/A, N/A	NONE	PUBLIC	MEDICAL ASSISTANCE	3,262.
FARM LAND PROJECT - ROCKAGE (FRANK MPASI), N/A, N/A	NONE	PUBLIC	ENVIRONMENTAL	1,000.
<b>Total</b> .....				<b>▶ 3a</b> 16,079.
<b>b Approved for future payment</b>				
NONE				
<b>Total</b> .....				<b>▶ 3b</b> 0.





2008 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	BUILDINGS														
2	LAND - DELMAS ORPHANAGE	03/31/98	L				33,900.				33,900.			0.	
3	BUILDING - DELMAS ORPHANAGE	03/31/98	SL	40.00			79,100.				79,100.	19,285.		1,978.	21,263.
6	DORMATORY - CAZEAU	12/31/00	SL	40.00			30,000.				30,000.	5,250.		750.	6,000.
7	LAND - CAZEAU	12/31/00	L				189,000.				189,000.			0.	
38	LAND - WILLIAMSON	03/06/06	L				42,658.				42,658.			0.	
69	2007 WILLIAMSON IMPROVEMENTS	08/24/07	SL	40.00			12,845.				12,845.	107.		321.	428.
70	2008 WILLIAMSON IMPROVEMENTS	07/01/08	SL	40.00			347,810.				347,810.			4,348.	4,348.
	* 990-PF PG 1 TOTAL BUILDINGS						735,313.				735,313.	24,642.		7,397.	32,039.
	FURNITURE & FIXTURES														
1	FAX MACHINE	11/28/95	SL	5.00			652.				652.	652.		0.	652.
12	ACER LAPTOP	05/17/05	200DB	5.00			805.				805.	573.		93.	666.
13	IBM LAPTOP	06/17/05	200DB	5.00			1,009.				1,009.	719.		116.	835.
14	DELL COMPUTER	07/19/05	200DB	5.00			1,086.				1,086.	773.		125.	898.
15	PRINTER/FAX/SCANNER/COPIER	08/24/05	200DB	5.00			879.				879.	626.		101.	727.
16	SUN ELECTRONICS EQUIPMENT	03/23/05	200DB	5.00			3,180.				3,180.	2,264.		366.	2,630.
49	SAGE DONOR DATABASE SOFTWARE	08/24/06	SL	3.00			5,445.				5,445.	2,571.		1,815.	4,386.
60	VIDEO EQUIPMENT	02/10/06	200DB	5.00			682.				682.	354.		131.	485.

2008 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
61	LAPTOPS (2)	02/16/06	200DB	5.00		HY17	1,678.				1,678.	873.		322.	1,195.
62	LAPTOP (SUSIE)	03/20/06	200DB	5.00		HY17	1,472.				1,472.	765.		283.	1,048.
63	LAPTOP (KATHRYN)	05/17/06	200DB	5.00		HY17	1,137.				1,137.	591.		218.	809.
64	LAPTOP (CAROL)	05/17/06	200DB	5.00		HY17	825.				825.	429.		158.	587.
65	CAMERA EQUIPMENT	05/17/06	200DB	5.00		HY17	635.				635.	330.		122.	452.
66	SURGICAL MICROSCOPE (CLINIC)	06/06/06	200DB	5.00		HY17	6,402.				6,402.	3,329.		1,229.	4,558.
67	DIAGNOSTIC INSTRUMENTS (CLINIC)	07/13/06	200DB	5.00		HY17	2,923.				2,923.	1,520.		561.	2,081.
68	PROJECTOR	10/09/06	200DB	5.00		HY17	1,375.				1,375.	715.		264.	979.
71	EQUIPMENT	05/15/08	200DB	5.00		MQ19B	2,987.			1,494.	1,493.			1,867.	373.
	* 990-PF PG 1 TOTAL FURNITURE & FIXTURES						33,172.			1,494.	31,678.	17,084.		7,771.	23,361.
	TRANSPORTATION EQUIPMENT														
4	TOYOTA 4 RUNNER	12/14/99	SL	5.00		HY16	10,384.				10,384.	10,384.		0.	10,384.
8	HYDUNDAI PRECISION GALLOPER	07/08/02	SL	5.00		HY16	24,750.				24,750.	24,750.		0.	24,750.
10	VEHICLE - OTHER	08/23/05	200DB	5.00		HY17	10,000.				10,000.	7,120.		1,152.	8,272.
11	VEHICLE - OTHER	12/07/05	200DB	5.00		HY17	8,000.				8,000.	5,696.		922.	6,618.
27	ISUZU TROOPER	07/14/06	200DB	5.00		HY21	37,200.				37,200.	7,760.		2,850.	10,610.
72	TRUCK (OHLINGER)	02/25/08	200DB	5.00		MQ19B	21,000.			10,500.	10,500.			14,175.	3,675.
73	TRUCK (FEEDING PROGRAM)	10/15/08	200DB	5.00		MQ19B	25,977.			12,989.	12,988.			13,638.	649.





FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	AMOUNT
IRS	13.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	13.

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
CHARLES SCHWAB	15,888.	0.	15,888.
WELLS FARGO	2,560.	0.	2,560.
TOTAL TO FM 990-PF, PART I, LN 4	18,448.	0.	18,448.

FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
UNREALIZED GAIN ON INVESTMENTS	<60,577.>	0.	<60,577.>
MERCY CLINIC SERVICE REVENUE	17,968.	0.	17,968.
TOTAL TO FORM 990-PF, PART I, LINE 11	<42,609.>	0.	<42,609.>

FORM 990-PF LEGAL FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL	50,390.	0.	0.	50,390.
TO FM 990-PF, PG 1, LN 16A	50,390.	0.	0.	50,390.

FORM 990-PF	ACCOUNTING FEES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING	9,631.	0.	0.	9,631.	
TO FORM 990-PF, PG 1, LN 16B	9,631.	0.	0.	9,631.	

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
OTHER PERSONNEL & PROFESSIONAL FEES	150,317.	5,043.	0.	145,274.	
TO FORM 990-PF, PG 1, LN 16C	150,317.	5,043.	0.	145,274.	

FORM 990-PF	TAXES			STATEMENT	7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PAYROLL	8,288.	0.	0.	8,288.	
REAL ESTATE TAXES	24,712.	0.	0.	24,712.	
TO FORM 990-PF, PG 1, LN 18	33,000.	0.	0.	33,000.	

FORM 990-PF	OTHER EXPENSES			STATEMENT	8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
DISTRIBUTED DONATED FOOD, PERSONAL GOODS & SUPPLIES	682,846.	0.	0.	682,846.	
BANK & MERCHANT FEES	8,267.	0.	0.	8,267.	
BOOKS & SUBSCRIPTIONS	3,597.	0.	0.	3,597.	
BUILDING SECURITY	20,606.	0.	0.	20,606.	

EQUIPMENT RENTAL & MAINT	1,418.	0.	0.	1,418.
MEALS & ENTERTAINMENT	9,247.	0.	0.	9,247.
OUTSIDE COMPUTER SERVICES	295.	0.	0.	295.
POSTAGE & DELIVERY	52,404.	0.	0.	52,404.
REPAIRS & MAINTENANCE	16,540.	0.	0.	16,540.
SHIPPING, FREIGHT & CUSTOMS	111,993.	0.	0.	111,993.
SOFTWARE	4,687.	0.	0.	4,687.
STORE PURCHASES & SUPPLIES	60,618.	0.	0.	60,618.
SUPPLIES - BEDDING, TOWELS	16,530.	0.	0.	16,530.
SUPPLIES - BEVERAGES	10,859.	0.	0.	10,859.
SUPPLIES - CLOTHING & SHOES	1,218.	0.	0.	1,218.
SUPPLIES - DIAPERS	51,532.	0.	0.	51,532.
SUPPLIES - FOOD	181,200.	0.	0.	181,200.
SUPPLIES - FUNERAL	4,454.	0.	0.	4,454.
SUPPLIES - MEDICAL	106,314.	0.	0.	106,314.
SUPPLIES - OFFICE	32,788.	0.	0.	32,788.
SUPPLIES - TOILETRIES	15,920.	0.	0.	15,920.
TELEPHONE & COMMUNICATIONS	39,512.	0.	0.	39,512.
WEBSITE EXPENSE	2,824.	0.	0.	2,824.
MEDICAL PROCEDURES	4,895.	0.	0.	4,895.
CURRENCY VALUE CHANGE	753.	0.	0.	753.
MISCELLANEOUS	40,401.	0.	0.	40,401.
INTERNET EXPENSE	1,532.	0.	0.	1,532.
REAPPROPRIATED ASSETS	62,460.	0.	0.	62,460.
<b>TO FORM 990-PF, PG 1, LN 23</b>	<b>1,545,710.</b>	<b>0.</b>	<b>0.</b>	<b>1,545,710.</b>

FORM 990-PF	U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS		STATEMENT	9
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
BROKERAGE BOND FUNDS		X	26,336.	26,336.
TOTAL U.S. GOVERNMENT OBLIGATIONS				
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS			26,336.	26,336.
TOTAL TO FORM 990-PF, PART II, LINE 10A			26,336.	26,336.

FORM 990-PF	CORPORATE STOCK	STATEMENT	10
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE	
BROKERAGE SECURITIES	0.	0.	
TOTAL TO FORM 990-PF, PART II, LINE 10B	0.	0.	

FORM 990-PF	OTHER INVESTMENTS	STATEMENT	11
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
BROKERAGE OTHER INVESTMENTS	FMV	137,887.	77,310.
TOTAL TO FORM 990-PF, PART II, LINE 13		137,887.	77,310.

FORM 990-PF	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT	12
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
FAX MACHINE	652.	652.	0.
LAND - DELMAS ORPHANAGE	33,900.	0.	33,900.
BUILDING - DELMAS ORPHANAGE	79,100.	21,263.	57,837.
TOYOTA 4 RUNNER	10,384.	10,384.	0.
DORMATORY - CAZEAU	30,000.	6,000.	24,000.
LAND - CAZEAU	189,000.	0.	189,000.
HYDUNDAI PRECISION GALLOPER	24,750.	24,750.	0.
VEHICLE - OTHER	10,000.	8,272.	1,728.
VEHICLE - OTHER	8,000.	6,618.	1,382.
ACER LAPTOP	805.	666.	139.
IBM LAPTOP	1,009.	835.	174.
DELL COMPUTER	1,086.	898.	188.
PRINTER/FAX/SCANNER/COPIER	879.	727.	152.
SUN ELECTRONICS EQUIPMENT	3,180.	2,630.	550.
ISUZU TROOPER	37,200.	10,610.	26,590.
LAND - WILLIAMSON	42,658.	0.	42,658.
SAGE DONOR DATABASE SOFTWARE	5,445.	4,386.	1,059.
VIDEO EQUIPMENT	682.	485.	197.
LAPTOPS (2)	1,678.	1,195.	483.
LAPTOP (SUSIE)	1,472.	1,048.	424.
LAPTOP (KATHRYN)	1,137.	809.	328.
LAPTOP (CAROL)	825.	587.	238.
CAMERA EQUIPMENT	635.	452.	183.

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SURGICAL MICROSCOPE (CLINIC)	6,402.	4,558.	1,844.
DIAGNOSTIC INSTRUMENTS (CLINIC)	2,923.	2,081.	842.
PROJECTOR	1,375.	979.	396.
2007 WILLIAMSON IMPROVEMENTS	12,845.	428.	12,417.
2008 WILLIAMSON IMPROVEMENTS EQUIPMENT	347,810.	4,348.	343,462.
TRUCK (OHLINGER)	2,987.	1,867.	1,120.
TRUCK (FEEDING PROGRAM)	21,000.	14,175.	6,825.
	25,977.	13,638.	12,339.
<b>TOTAL TO FM 990-PF, PART II, LN 14</b>	<b>905,796.</b>	<b>145,341.</b>	<b>760,455.</b>

FORM 990-PF OTHER ASSETS STATEMENT 13

DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
UNREALIZED GAIN ON INVESTMENTS	8,668.	<60,577.>	0.
TO FORM 990-PF, PART II, LINE 15	8,668.	<60,577.>	0.

FORM 990-PF INTEREST AND PENALTIES STATEMENT 14

TAX DUE FROM FORM 990-PF, PART VI	2.
LATE PAYMENT INTEREST	4.
LATE PAYMENT PENALTY	6.
<b>TOTAL AMOUNT DUE</b>	<b>12.</b>

FORM 990-PF LATE PAYMENT PENALTY STATEMENT 15

DESCRIPTION	DATE	AMOUNT	BALANCE	MONTHS	PENALTY
TAX DUE	05/15/09	180.	180.	7	6.
EXTENSION PAYMENT	11/16/09	<178.>	2.		
DATE FILED	11/16/09		2.		
<b>TOTAL LATE PAYMENT PENALTY</b>					<b>6.</b>

FORM 990-PF LATE PAYMENT INTEREST STATEMENT 16

DESCRIPTION	DATE	AMOUNT	BALANCE	RATE	DAYS	INTEREST
TAX DUE	05/15/09	180.	180.	.0400	185	4.
EXTENSION PAYMENT	11/16/09	<178.>	6.	.0400		
DATE FILED	11/16/09		6.			
TOTAL LATE PAYMENT INTEREST						4.

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS STATEMENT 17

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
SUSAN KRABACHER 201 N. MILL STREET, SUITE 201 ASPEN, CO 81611	PRESIDENT 40.00	0.	0.	0.
B. JOSEPH KRABACHER 201 N. MILL STREET, SUITE 201 ASPEN, CO 81611	SECRETARY/TREASURER 0.00	0.	0.	0.
C. FRANK SCOTT JR 1192 EAST 2700 SOUTH, #B10 SALT LAKE CITY, UT 84106	DIRECTOR 0.00	0.	0.	0.
E.J. CHRISTENSEN PO BOX 10061 ASPEN, CO 81612	DIRECTOR 0.00	0.	0.	0.
JEAN-DANY PIERRE-FRANCOIS COMPAGNIE DES TABACS, COMME IL FAUT, ROUTE DUMEZ TABARRE, HAITI	DIRECTOR 0.00	0.	0.	0.
JEFFREY LECK 101 E. KENNEDY BLVD., STE 3925 TAMPA, FL 33602	DIRECTOR 0.00	0.	0.	0.
MICHAEL LYPKA 885 SECOND AVENUE, 49TH FLOOR NEW YORK, NY 10017	DIRECTOR 0.00	0.	0.	0.

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KEN DELASKI 201 N. MILL STREET, SUITE 201 ASPEN, CO 81611	DIRECTOR 0.00	0.	0.	0.
DAVE ANDERSON 201 N. MILL STREET, SUITE 201 ASPEN, CO 81611	DIRECTOR 0.00	0.	0.	0.
DR. CAROL ANDERSON 201 N. MILL STREET, SUITE 201 ASPEN, CO 81611	DIRECTOR 0.00	0.	0.	0.
RICHARD K. TAYLOR 201 N. MILL STREET, SUITE 201 ASPEN, CO 81611	DIRECTOR 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		<u>0.</u>	<u>0.</u>	<u>0.</u>

COPY

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FORM 990-PF

CASH DEEMED CHARITABLE EXPLANATION STATEMENT  
PART X, LINE 4

STATEMENT 18

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CASH DEEMED HELD FOR CHARITABLE ACTIVITIES REQUIRED TO SUPPORT MONTHLY  
OPERATIONAL EXPENSES AND PROGRAMS OF THE ORGANIZATION.

COPY



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FORM 990-PF

PART XV - LINE 1A  
LIST OF FOUNDATION MANAGERS

STATEMENT 19

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NAME OF MANAGER

SUSAN KRABACHER  
B. JOSEPH KRABACHER

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**Depreciation and Amortization** 990-PF  
 (Including Information on Listed Property)

**2008**

Attachment  
 Sequence No. **67**

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return <b>MERCY AND SHARING</b>	Business or activity to which this form relates <b>FORM 990-PF PAGE 1</b>	Identifying number <b>84-1323007</b>
---	--	---

**Part I Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount. See the instructions for a higher limit for certain businesses .....	<b>1</b>	250,000.
2 Total cost of section 179 property placed in service (see instructions) .....	<b>2</b>	
3 Threshold cost of section 179 property before reduction in limitation .....	<b>3</b>	800,000.
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- .....	<b>4</b>	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions .....	<b>5</b>	
<b>6</b> (a) Description of property (b) Cost (business use only) (c) Elected cost		
7 Listed property. Enter the amount from line 29 .....	<b>7</b>	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 .....	<b>8</b>	
9 Tentative deduction. Enter the smaller of line 5 or line 8 .....	<b>9</b>	
10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 .....	<b>10</b>	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 .....	<b>11</b>	
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 .....	<b>12</b>	
13 Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12 .....	<b>13</b>	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)**

14 Special depreciation for qualified property (other than listed property) placed in service during the tax year .....	<b>14</b>	24,983.
15 Property subject to section 168(f)(1) election .....	<b>15</b>	
16 Other depreciation (including ACRS) .....	<b>16</b>	9,212.

**Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**

**Section A**

17 MACRS deductions for assets placed in service in tax years beginning before 2008 .....	<b>17</b>	6,163.
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here .....	<b>18</b>	<input type="checkbox"/>

**Section B - Assets Placed in Service During 2008 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
<b>19a</b> 3-year property						
<b>b</b> 5-year property		24,981.	5 YRS.	MQ	200DB	4,697.
<b>c</b> 7-year property						
<b>d</b> 10-year property						
<b>e</b> 15-year property						
<b>f</b> 20-year property						
<b>g</b> 25-year property			25 yrs.		S/L	
<b>h</b> Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
<b>i</b> Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

**Section C - Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System**

<b>20a</b> Class life						
<b>b</b> 12-year			12 yrs.		S/L	
<b>c</b> 40-year	/		40 yrs.	MM	S/L	

**Part IV Summary (See instructions.)**

21 Listed property. Enter amount from line 28 .....	<b>21</b>	2,850.
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr. ....	<b>22</b>	47,905.
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs .....	<b>23</b>	

**Part V Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

**Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)**

**24a** Do you have evidence to support the business/investment use claimed?  Yes  No **24b** If "Yes," is the evidence written?  Yes  No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
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**25** Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use ..... **25**

**26** Property used more than 50% in a qualified business use:

ISUZU TROOPER	07/14/06	100.00 %	37,200.	37,200.	5.00	200DB-HY	2,850.	
:	:	%						
:	:	%						

**27** Property used 50% or less in a qualified business use:

:	:	%				S/L -		
:	:	%				S/L -		
:	:	%				S/L -		

**28** Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 ..... **28** 2,850.

**29** Add amounts in column (i), line 26. Enter here and on line 7, page 1 ..... **29**

**Section B - Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<b>30</b> Total business/investment miles driven during the year (do not include commuting miles) .....	5,000											
<b>31</b> Total commuting miles driven during the year ...												
<b>32</b> Total other personal (noncommuting) miles driven .....												
<b>33</b> Total miles driven during the year. Add lines 30 through 32 .....	5,000											
<b>34</b> Was the vehicle available for personal use during off-duty hours? .....		X										
<b>35</b> Was the vehicle used primarily by a more than 5% owner or related person? .....		X										
<b>36</b> Is another vehicle available for personal use? .....		X										

**Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

	Yes	No
<b>37</b> Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? .....		
<b>38</b> Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners .....		
<b>39</b> Do you treat all use of vehicles by employees as personal use? .....		
<b>40</b> Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? .....		
<b>41</b> Do you meet the requirements concerning qualified automobile demonstration use? .....		

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
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**42** Amortization of costs that begins during your 2008 tax year:

:	:				
:	:				

**43** Amortization of costs that began before your 2008 tax year ..... **43**

**44 Total.** Add amounts in column (f). See the instructions for where to report ..... **44**

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box  **X**

**Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

<b>Part II</b>	<b>Additional (Not Automatic) 3-Month Extension of Time.</b> Only file the original (no copies needed).	
Type or print  File by the extended due date for filing the return. See instructions.	Name of Exempt Organization <b>MERCY AND SHARING</b>	Employer identification number <b>84-1323007</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>201 NORTH MILL STREET, SUITE 201</b>	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>ASPEN, CO 81611</b>	

**Check type of return to be filed** (File a separate application for each return):

- |                                      |   |   |                                      |                                    |                                    |
|--------------------------------------|---|---|--------------------------------------|------------------------------------|------------------------------------|
| <input type="checkbox"/> Form 990    | <input type="checkbox"/> Form 990-EZ            | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 5227 | <input type="checkbox"/> Form 8870 |
| <input type="checkbox"/> Form 990-BL | <input checked="" type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 4720   | <input type="checkbox"/> Form 6069 |                                    |

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

**MERCY AND SHARING**

• The books are in the care of **▶ 201 N. MILL STREET, SUITE #201 - ASPEN, CO 81611**  
 Telephone No. **▶ 970-925-1492** FAX No. **▶**

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for.

- 4** I request an additional 3-month extension of time until **NOVEMBER 15, 2009**.
- 5** For calendar year **2008**, or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_.
- 6** If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period
- 7** State in detail why you need the extension  
**ADDITIONAL TIME IS NEEDED TO GATHER COMPLETE & ACCURATE INFORMATION.**

<b>8a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>8a</b>	<b>\$</b>	<b>180.</b>
<b>b</b> If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	<b>8b</b>	<b>\$</b>	<b>0.</b>
<b>c Balance Due.</b> Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>8c</b>	<b>\$</b>	<b>180.</b>

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature **▶** \_\_\_\_\_ Title **▶** \_\_\_\_\_ Date **▶** \_\_\_\_\_