Mercy Conference and Retreat Center

Return of Organization Exempt From Income Tax June 30, 2018

OPEN TO PUBLIC INSPECTION

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

Open to Public

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2017 calendar year, or tax year beginning JUL 1, 2017 and ending JUN 30, 2018

В	Check if	C Name of organization	D Employer identif	ication number			
	Addre	MERCY CONFERENCE AND RETREAT CENTER					
F	chang Name chang		$ _{26-2}$	680503			
\vdash	Initial return		uite E Telephone numbe				
	Final	2030 MODUL CEVED DOVD		909-4651			
	return termin ated		G Gross receipts \$	1,472,354.			
	Amen	ded Cm TOTITO MO 62121					
	Applie		H(a) Is this a group r	? Yes X No			
	pendi	SAME AS C ABOVE	H(b) Are all subordinates i	100000000000000000000000000000000000000			
1 7	Гах-ех		10.0	list. (see instructions)			
JV	Vebsi	te: HTTP://WWW.MERCYCENTERSTL.ORG/#	H(c) Group exemption				
				M State of legal domicile: MO			
	art I	Summary		VI otato or logal dominio. ===			
		Briefly describe the organization's mission or most significant activities: IMPELLED	BY THE GOSPE	L, THE			
Governance		MERCY CONFERENCE AND RETREAT CENTER IN THE T	RADITION OF T	THE SISTERS			
rna	2	Check this box if the organization discontinued its operations or disposed of m	ore than 25% of its net a	ssets.			
ove		Number of voting members of the governing body (Part VI, line 1a)	1	10			
Ğ		Number of independent voting members of the governing body (Part VI, line 1b)		10			
Activities &		Total number of individuals employed in calendar year 2017 (Part V, line 2a)		16			
Ϋ́Ε		Total number of volunteers (estimate if necessary)		2			
cţi	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.			
٩		Net unrelated business taxable income from Form 990-T, line 34		0.			
			Prior Year	Current Year			
ø	8	Contributions and grants (Part VIII, line 1h)	63,535.	73,301.			
Revenue		Program service revenue (Part VIII, line 2g)	800,766.	870,157.			
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	124,449.	239,865.			
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	74,886.	43,678.			
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,063,636.	1,227,001.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.			
es		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	546,947.	646,148.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.			
xb	b	Total fundraising expenses (Part IX, column (D), line 25) ►80,239.					
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	688,299.	761,195.			
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,235,246.				
	19	Revenue less expenses. Subtract line 18 from line 12	-171,610.	-180,342.			
ivet Assets or Fund Balances			Beginning of Current Year	End of Year			
Sala	20	Total assets (Part X, line 16)	3,531,789.	3,296,222.			
ndA	21	Total liabilities (Part X, line 26)	117,978.	87,714.			
		Net assets or fund balances. Subtract line 21 from line 20	3,413,811.	3,208,508.			
	ırt II	Signature Block					
		lities of perjury, I declare that I have examined this return, including accompanying schedules and state	331	y knowledge and belief, it is			
rue,	correc	rt, and complete. Declaration of preparer (other than officer) is based on all information of which prepare.	rer has any knowledge.				
		Signature of officer	Date				
Sigr			Date				
Here	е	DAWN STRINGFIELD, EXECUTIVE DIRECTOR Type or print name and title					
			Date Check	II PTIN			
) o : d	ľ	Print/Type preparer's name Preparer's signature	Ollock	2 2000			
Paid		JENNAH R. PURK, CPA JENNAH R. PURK, CPA	12/04/18 if self-employs	P00614610			
	Only	Firm's name PURK & ASSOCIATES, P.C.	Firm's EIN ▶	26-4532849			
J56	Only	Firm's address 1034 SOUTH BRENTWOOD BLVD. STE 2000	Dia / 2	1// 00/ /000			
	- 1 - 1-	SAINT LOUIS, MO 63117	Phone no. (3				
vlay	tne IF	RS discuss this return with the preparer shown above? (see instructions)		X Yes No			

Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission: IMPELLED BY THE GOSPEL, THE MERCY CONFERENCE AND RETREAT CENTER IN	
	TRADITION OF THE SISTERS OF MERCY OF THE AMERICAS, PROVIDES A TRAN	MOUIL
	ENVIRONMENT OF HOSPITALITY AND HEALING, WHERE GROUPS AND INDIVIDUA	
	OF ALL FAITHS CAN ENGAGE IN PRAYER, REFLECTION AND DIALOGUE FOR	
2	Did the organization undertake any significant program services during the year which were not listed on the	es X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	es X No
,	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expension 501(a)(4) and 501(a)(4) arguments for each of its three largest program services, as measured by expension 501(a)(b) and 501(a)(b) arguments for each of its three largest program services, as measured by expension 501(a)(b) and 501(a)(b) arguments for each of its three largest program services, as measured by expension 501(a)(b) arguments for each of its three largest program services, as measured by expension 501(a)(b) and 501(a)(b) arguments for each of its three largest program services, as measured by expension 501(a)(b) arguments for each of its three largest program services, as measured by expension 501(a)(b) arguments for each of its three largest program services.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expense	es, and
4-	revenue, if any, for each program service reported. (Code:) (Expenses \$ 791,663 • including grants of \$) (Revenue \$ 697	7,052.)
4a		
	HOSTED CONFERENCES AND RETREATS - MCRC SERVES GROUPS IN THE MIDWES AROUND THE UNITED STATES BY PROVIDING A SACRED ENVIRONMENT THAT	P.T. WIND
		227
	PROMOTES DEEPER REFLECTION, GREATER COLLABORATION AND COMMUNICATION AND COMMUNICATIO	
	AND THE OPPORTUNITY TO EXPAND THE POSSIBILITIES FOR POSITIVE IMPAC	
	THEIR RESPECTIVE FIELDS OF INFLUENCE. MCRC HOSTS FAITH COMMUNITIE	<u>s</u>
	FROM DIVERSE SPIRITUAL TRADITIONS, HEALTH AND SOCIAL SERVICE	
	ORGANIZATIONS, AND SCHOOLS AND UNIVERSITIES. HOSTED GROUPS USE TH	
	SPACE FOR RETREATS, EDUCATIONAL PROGRAMS, STRATEGIC PLANNING WORKS	HOPS,
	AND OPERATIONAL MEETINGS. MCRC FOCUSES ITS HOSPITALITY ON THE NEE	DS OF
	EACH GROUP IN THE ARRANGEMENT OF MEETING AND GATHERING SPACES, DIE	ETARY
	REQUIREMENTS OF GUESTS, AND OVERNIGHT ACCOMMODATIONS.	
4b	(Code:) (Expenses \$ 407,220 • including grants of \$) (Revenue \$ 145	5,925.)
	CRM SPONSORED PROGRAMS AND SPIRITUAL DIRECTION AND PRIVATE RETREAT	
	FINDING AND FOLLOWING ONE'S AUTHENTIC VOICE IS PARAMOUNT TO PERSON	
	TRANSFORMATION. MCRC SUPPORTS THIS DEEPLY PERSONAL WORK BY OFFERI	
	SPIRITUAL DIRECTION, DAYS OF PRIVATE REFLECTION, AND INDIVIDUALLY	
	DIRECTED RETREATS. THE INTEGRATION OF BODY, MIND, AND SPIRIT IS A	T.GO
	SUPPORTED THROUGH THE WORK OF ONSITE HEALING TOUCH PRACTITIONERS A	
	THERAPEUTIC MASSAGE/BODYWORK PROFESSIONALS. MCRC OFFERS PROGRAMS T	
	ENCOURAGE AND EMPOWER INDIVIDUALS TO GREATER DEPTH AND BREADTH IN	
	SPIRITUAL JOURNEYS. RETREATS, DAYS OF REFLECTION, BOOK STUDIES, AN	
	SHORTER PROGRAMS OFFER A WIDE ARRAY OF PRESENTERS AND TOPICS TO ME	
	THE NEEDS OF PARTICIPANTS. ART, MUSIC, AND MOVEMENT ARE OFTEN INCL	ODED
14	AS PART OF A HOLISTIC APPROACH. REVERENCE FOR THE EARTH AND	
4c	(Code:) (Expenses \$)
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 1,198,883.	
		990 (2017)

15441204 141374 15770000

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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, 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		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X		in the	
	as applicable.	281		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,		1	
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		_ <u>X</u> _
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			77
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	.		v
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
u.	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	47		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		
.0	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		-+	
and the	complete Schedule G, Part III	19		X
			200	

Part IV Checklist of Required Schedules (continued)

20a DX the organization operate one or more hospital facilities / If "Yes," complete Schedule II. 20b J. 20c J. DX b If "Yes" in cell 20d, of the organization active and copy of its audietic financial statements to this return? 21 DX the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX. Codumn (A), inc. 97 (*) "ex," complete Schedule I, Part I and II DX objects (*) "experiment of the complex Schedule I and II DX objects (*) "experiment of the complex Schedule I and II DX objects (*) "experiment of the organization around "Yes" to Part VII, Section A, Inc. 3, 4, or \$6 about compensation of the organization scurrent and former orficers, directors, trustees, key employees, and highest compensation of the organization scurrent and former orficers, directors, trustees, key employees (*) If "Yes," answer lines 25 th through 24d and complete Schedule K. If "No", you to line 25s (*) DX the organization inverse as its sead after December 31, 2002? If "Yes," answer lines 25 th through 24d and complete Schedule K. If "No", you to line 25s (*) DX the organization maintain an escrow account offers the same schedule K. If "No", you to line 25s (*) DX the organization maintain an escrow account offers the same schedule K. If "No", or or line 25s (*) DX the organization maintain an escrow account offers the same schedule K. If "No", organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person of uning the year? If "Yes, complete Schedule L, Part IV "SX (*) Co				Yes	_
21 Did the organization report more than \$5,000 of grants or other assistance to any demestic organization or domestic organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27 if "ves," complete Schedule I, Parts I and III. 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27 if "ves," complete Schedule I, Parts I and III. 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "ves," complete Schedule III. 24 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 proceeds of tax-exempt bonds are the last day of the year, that was proceeds of tax-exempt bonds beyond a temporary period exception". 25 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 26 Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 26 Did the organization aware that it engaged in an excess benefit transaction with a disqualified person time that the transaction with a disqualified person during the year? 27 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule I., Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a prant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule II., Part IV III. 28 Was the	20a		20a		X
domestic government on Part IX, column (A), line 17 if "Fes," complete Schedule I, Parts I and II	b		20b		
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 21 if "res", complete Schedule (Part I and III	21				
Part IX, column (A), line 27 if "Yes," complete Schedule I, Parts I and III and III be organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, furstees, key employees, and highest compensated employees? If "Yes," complete Schedule I, Part III line 25s 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 lines 24b through 24d and complete Schedule I, I'm'o, 'go to line 25s 25a 25b Did the organization invest arry proceeds of tax-exempt bonds beyond a temporary period exception? 25b Did the organization invest arry proceeds of tax-exempt bonds period accomplete Schedule I, Part I line 25s 25c Section 501(6)8, 501(6)4, and 501(6)(29) organizations. Did the organization excess benefit transaction with a disqualified person during the year? 14 Yes," complete Schedule I, Part I line 15b Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? 14 Yes," complete Schedule I, Part I line 15b Did the organization has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule I, Part II line 15b Did the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule I, Part II line 15b Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, agrant selection committee embers, or to a 35% controlled entity or family member of a current or former officer, director, trustee, or key employee if "Yes," complete Schedule I, Part IV line 15b Did the organization provide a grant or other assistance to an officer, di			21	1	X
23 Did the organization answer "Yes" to Part VII, Section A, Ine 3.4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 23 X X 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answerines 24b through 24d and complete Schedule K. If "No", 9 to Iline 25a X X Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24d Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24d Did the organization as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? 24d Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 24d Did the organization with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a X is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization spiror Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part II 25b X X Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, clirectors, trustees, key employees, highest compensated employees, or disqualide persons? If "Yes," complete Schedule L, Part IV In 25b Did the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV In 25b Did the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV In 25b Did the organization receive more than 3256,000 in non-cash contributions of "Yes," complete Sc	22	Section 1 and 1 an			
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 23			22		X
Schedule J 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 lines 24b through 24d and complete Schedule K. If "No", go to line 25a 25a Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 26b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 26c Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year of defease any tax-exempt bonds? 27c Did the organization with a disqualide person during the year? If "Yes," complete Schedule L, Part II and that the transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II and that the transaction report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, itustees, key employees, highest compensated employees, or discqualified persons? If "Yes," complete Schedule L, Part II 27d Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, itustees, key employees, highest compensated employees, or discqualfied persons? If "Yes," complete Schedule L, Part IV 28d Was the organization provide a grant or other assistance to an officer, director, trustee, key employees, substantial contribution or employee thereof, a grant selection committee member, or to a 55% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV 28d Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV 28d A annity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28d A A current of forme	23				
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002 /I "Yes," answer lines 24b through 24d and complete Schedule K, If "No", go to line 25a 24a					
start day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? "24d 24d 25a Section 501(p(3), 501(p(4), and 501(p(2)) organizations. Did the organization engage in an excess benefit transaction with a disqualited person during the year? "1 "25a X 15b Is the organization aware that it engaged in an excess benefit transaction with a disqualited person during the year? "1 "25c, "complete Schedule L, Part I "25b X 15b Is the organization report any amount on Part X. line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II "28 Was the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of a vary to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV 12b X X Did the organi		Schedule J	23		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d Did the organization and invest any on behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part I Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable finigh thresholds, conditions, and exceptions): A neutrent or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV By A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Did the organization receive more than 250,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I II Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I III Did the organization liquidate,	24a				
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account ther than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an 'no behalf of' issuer for bonds outstanding at any time during the year? 24d 25a Section 50f(c)(3), 50f(c)(4), and 50f(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I b is the organization aware that it engaged in an excess benefit transaction with a disqualified person of uning the year? If 'Yes,' complete Schedule L, Part I 25b X 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28b X b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28b X Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M. 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M. 29 Did the organization organization or 100% of an entity disregarded as separate from the organizati					
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Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI and the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		Schedule N, Part II	32		X
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Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	34				
Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		Part V, line 1	34	X	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?					
Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			35b		
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 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 		If "Yes," complete Schedule R, Part V, line 2	36		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
		and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
Note. All Form 990 filers are required to complete Schedule O	38				
		Note. All Form 990 filers are required to complete Schedule O	38	Х	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V		• • • • • • • • • • • • • • • • • • • •			
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0	0.000		
b		1b	0			
C	to day that will be a series of the series o					
	(gambling) winnings to prize winners?	······i		1c		
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		1.0			
	filed for the calendar year ending with or within the year covered by this return		16			
b	9			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	s)	***************************************			77
12				3a		X
b				3b		
44	At any time during the calendar year, did the organization have an interest in, or a signature or other					х
h	financial account in a foreign country (such as a bank account, securities account, or other financial If "Yes," enter the name of the foreign country:	accour	it)?	4a		Λ
D	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	\ cccum	to (EDAD)			
5a				En		X
b				5a 5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the state of the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000,000, and did the organization have annual gross receipts that are normally greater than \$100,000,000, and did the organization have annual gross receipts that are normally greater than \$100,000,000, and did the organization have annual gross receipts that are normally greater than \$100,000,000, and did the organization have annual gross receipts that are normally greater than \$100,000,000,000,000,000,000,000,000,000			5c		
ou	any contributions that were not tax deductible as charitable contributions?			6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions			0a		
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).		***************************************	OD		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	rvices pr	ovided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w					
				7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е				7e		
f				7f		
g			/d) /d/dd	7g		
h				7h		
to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds.						
_			•••••	8		
				9a	\rightarrow	
1000	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10 a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a				
1	Section 501(c)(12) organizations. Enter:	100		, jū.,		
	Gross income from members or shareholders	11a				
	Gross income from other sources (Do not net amounts due or paid to other sources against	114				
	amounts due or received from them.)	11b				
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a		
		12b				
	Section 501(c)(29) qualified nonprofit health insurance issuers.					
	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c				
4a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	0		14b		
				Form	990 (2017)

Form 990 (2017) MERCY CONFERENCE AND RETREAT CENTER 26-2680503 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.					
	Check if Schedule O contains a response or note to any line in this Part VI			X		
Sec	tion A. Governing Body and Management					
			Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 10					
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent 1b 10					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	ł				
_		2		Х		
3	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision			- 21		
0	of officers, directors, or trustees, or key employees to a management company or other person?	,		Х		
4		3		X		
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X		
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	Х			
		6	Δ			
/a		_	37			
		7a	X			
b						
-		7b	Х			
8						
а	The governing body?	8a	Х			
6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 5 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 6 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 7 The governing body? 8 The governing body? 8 Dis there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailling address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a Did the organization have local chapters, branches, or affiliates? 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b It alsa the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990. 11a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Use Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done		X				
9						
		9		X		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)					
			Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?	10a		X		
b						
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X			
and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	98-4	30.			
 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 12 						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X			
organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 11a Did the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy?						
	in Schedule O how this was done	12c	X			
13	Did the organization have a written whistleblower policy?	13	Х			
14		14	Х			
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?		131			
а	The organization's CEO, Executive Director, or top management official	15a	Х			
	Other officers or key employees of the organization	15b	Х			
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a					
	taxable entity during the year?	16a		X		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's					
	exempt status with respect to such arrangements?	16b				
Sect	tion C. Disclosure	ומטו				
	List the states with which a copy of this Form 990 is required to be filed NONE					
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	voilet				
		vallabl	e			
	for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website W Upon request Other (explain in Schedule O)					
10	- I I I I I I I I I I I I I I I I I I I	c.				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	tinano	cial			
	statements available to the public during the tax year.					
	State the name, address, and telephone number of the person who possesses the organization's books and records:		2			
	DAWN STRINGFIELD - 314-909-4651 2039 N. GEYER ROAD, ST. LOUIS, MO 63131					

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

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee,

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B) Average hours per	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					one h an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	tee or director	Institutional trustee	Officer	Key employee	Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) JUDY CARRON, RSM DIRECTOR	1.00	x						0.	0.	0.
(2) JAN HAYES, RSM	1.00					Г				
DIRECTOR		Х						0.	0.	0.
(3) JACQUELYN RICHMOND	2.00									
CHAIR (4) SANDRA SHOTWELL	2 00	Х	_	X				0.	0.	0.
(4) SANDRA SHOTWELL TREASURER	2.00	x		х				0.	0.	0
(5) LAURA RICHTER	1.00			Δ				0.	0.	0.
DIRECTOR	1.00	Х						0.	0.	0.
(6) DEBORAH MOLL	1.00							0.		
DIRECTOR		х						0.	0.	0.
(7) KEVIN LEE	2.00								11000	
VICE-CHAIR		X		X				0.	0.	0.
(8) JACK FOX	1.00									
DIRECTOR		Х						0.	0.	0.
(9) TONIA BURKE	1.00								and a	
DIRECTOR	1 00	Х						0.	0.	0.
(10) JERI SCHULTZ	1.00									
DIRECTOR	40.00	X						0.	0.	0.
(11) DAWN STRINGFIELD	40.00			x				00 600	0.	0
EXECUTIVE DIRECTOR				Δ				88,629.	0.	0.
700007 44 00 47										F 900 (0017)

Form 990 (2017)

Pa	t VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	yees	, an	d Hi	ighe	st (Compensated Employe	es (continued)		
	(A)	(B)			(0	C)			(D)	(E)	(F)	
	Name and title	Average	Position (do not check more than one					one	Reportable	Reportable	Estimated	
		hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	amount of	
		week		T ar	iu a d	recto	or/trus	ree)	- Trom	from related	other	
		(list any hours for	recto						the	organizations	compensation	n
		related	ordi	99			sated		organization	(W-2/1099-MISC)		_
		organizations	rustee	trust		88	nben		(W-2/1099-MISC)		organizatior and related	
		below	dual t	tiona		yoldr	st cor				organization	
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organization	Ü
			-	一	_	×						_
			1									
					_							-
												_
								_				_
	· · · · · · · · · · · · · · · · · · ·							-				_
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							H					-
	4-4-46-38			H			H					_
1h	Sub-total						щ	<u> </u>	88,629.	0	. ().
10	Sub-total Total from continuation sheets to Part VI	I Section A	•••••	•••••			! 1		0.	0	100	<u>, </u>
d									88,629.	0		<u>, </u>
u	Total (add lines 1b and 1c) Total number of individuals (including but n										•	
2		ot iimited to tri	ose	iiste	ual	JOVE	e) WII	O I	eceived more than \$100	,000 of reportable		C
	compensation from the organization										Yes N	lo
3	Did the organization list any former officer	director or true	otor	. ko		مامد		0.	highest semespected ev		Tes N	0
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for si				-						3 2	7
4	50 36 0 58 0 E								hor componentian from		3 2	7
7	For any individual listed on line 1a, is the su and related organizations greater than \$150											ζ
5	Did any person listed on line 1a receive or a										4 2	7
5	rendered to the organization? If "Yes," com										5 2	7
Sec	tion B. Independent Contractors	olete Scriedule	3 0 10	UI SU	ich þ	Jers	OH				5 X	7
	Complete this table for your five highest con	mnonceted ind	lone	nda	nt o	t	n o t o	t	bot veesived week them	1100 000 of a success		_
1	the organization. Report compensation for t										isation from	
	(A)	ne calendar ye	are	enuir	ig w	un c	or wi	Lriir		ear.	(0)	_
	Name and business	address	NC	NE	5				(B) Description of se	ervices	(C) Compensation	
			110	7111				+			Componential	_
								+				_
								ı				
								+				
								+				_
								+				-
2	Total number of independent annual form	oludina kut	- 1ti-	nita	1+- 1	h	no 11-	نه ع	aboug) who re	ave ther		
2	Total number of independent contractors (in \$100,000 of companies from the organization		JUIT	illec	ו נט ז	tnos 0		rea	above) who received me	ore man		
	\$100,000 of compensation from the organiz	aliUli					-	-			Farm 000 /004	
											Form 990 (201	1)

Form 990 (2017)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax under sections 512 - 514 (C) Unrelated Related or Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b b Membership dues 1,200. c Fundraising events 1c 35,095. d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 37,006. g Noncash contributions included in lines 1a-1f: \$ 73,301 h Total. Add lines 1a-1f Business Code 2 a CONFERENCE/RETREAT REV 611430 697,052. 697,052 Program Service Revenue 611430 145,925. 145,925. CRM SPONSORED PROGRAMS 900002 c RENTAL INCOME FROM AFF 27,180. 27,180. f All other program service revenue 870,157. Total. Add lines 2a-2f. Investment income (including dividends, interest, and 55,015. 55,015. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other 426,000. assets other than inventory b Less: cost or other basis 241,150. and sales expenses c Gain or (loss) 184,850. 184,850 184,850. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$1,200. ofcontributions reported on line 1c). See 9,522. Part IV, line 18 _____a 4,203. b Less: direct expenses
b 5,319 5,319. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 24,812. 24,812. 11 a EMPLOYEE MEALS 722210 10,350. 10,350. b MANAGED SERVICES REVEN 561700 c OTHER INCOME 900099 3,197. 3,197. d All other revenue 38,359. e Total. Add lines 11a-11d 227,001. 881,336. 272,364. Total revenue. See instructions.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses Do not include amounts reported on lines 6b, Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 88,629. 70,017. 11,522. 7,090. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 434,328. 357,637. 47,475. 29,216. Pension plan accruals and contributions (include 37,922. 29,958. 4,930. 3,034. section 401(k) and 403(b) employer contributions) 50,913. 41,237. 5,990. 3,686. Other employee benefits 34,356. 27,141. 4,466. 2,749. Payroll taxes 10 11 Fees for services (non-employees): Management Legal 5,000. 3,950. 650. 400. c Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) Advertising and promotion 12 36,754. Office expenses 29,036. 4,778. 2,940. 13 21,549. 17,024. 1,724. 2,801. 14 Information technology 15 Royalties 26,310. 328,875 259,811. 42,754. 16 Occupancy 484. 382. 63. 39. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Interest Payments to affiliates _____ 21 1,433 1,814. 236 145. Depreciation, depletion, and amortization 22 19,660. 15,531. 2,556. 1,573. 23 Insurance Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 323,786. 323,786. DIETARY EXPENSES SPEAKERS, HOUSEKEEPING, 23,273. 21,940. 1,333. b C d e All other expenses 1,407,343. 1,198,883. 128,221. 80,239. Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2017) Part X Balance Sheet

	11.	Check if Schedule O contains a response or no	te to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			33,753.	1	27,569.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net	36,850.	3	36,850.		
	4	Accounts receivable, net		54,218.	4	26,838.	
	5	Loans and other receivables from current and for	E. C. Walter Hall				
		trustees, key employees, and highest compens	ated en	ployees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqual					
		section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of sec					
ets		employees' beneficiary organizations (see instr)			6		
Assets	7	Notes and loans receivable, net				7	
⋖	8	Inventories for sale or use			2,570.	8	2,570. 3,832.
	9	Prepaid expenses and deferred charges	,		10,492.	9	3,832.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	44,086.			
	b	Less: accumulated depreciation	10b	28,333.	0.	10c	15,753.
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, line	3,393,906.	12	3,182,810.		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			2 524 522	15	2 22 2 2 2 2
	16	Total assets. Add lines 1 through 15 (must equ			3,531,789.	16	3,296,222.
	17	Accounts payable and accrued expenses	77,558.	17	38,613.		
	18	Grants payable		40 400	18	40 101	
	19	Deferred revenue			40,420.	19	49,101.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
Liabilities	22	Loans and other payables to current and former			20 and		
piii		key employees, highest compensated employee					
Lia		Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines Schedule D				OF	
	26	Total liabilities. Add lines 17 through 25			117,978.	25 26	87,714.
	20	Organizations that follow SFAS 117 (ASC 958				20	O///II.
S		complete lines 27 through 29, and lines 33 an		There and			
JCe	27	Unrestricted net assets			3,372,000.	27	3,162,512.
alaı	28	Temporarily restricted net assets			41,811.	28	45,996.
d B	29					29	
'n		Organizations that do not follow SFAS 117 (A				20	
or F		and complete lines 30 through 34.		,,, 0.1.001.1.101.0			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds				30	
SSE	31	Paid-in or capital surplus, or land, building, or eq				31	
t A	32	Retained earnings, endowment, accumulated in				32	0/-24
ž	33	Total net assets or fund balances			3,413,811.	33	3,208,508.
	34	Total liabilities and net assets/fund balances			3,531,789.	34	3,296,222.
							Form 990 (2017)

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,22			
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,40			
3	Revenue less expenses. Subtract line 2 from line 1	3	-18			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,41	3,8	11.	
5	Net unrealized gains (losses) on investments	5	-2	4,9	61.	
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	3,20	8,5	08.	
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII				X	
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2b		X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,				
	consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		2c		X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.			- 1	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit						
	Act and OMB Circular A-133?		3a		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b			
			Form	990 (2017)	

732012 11-28-17

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

MERCY CONFERENCE AND RETREAT CENTER 26-2680503 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions)) **Total**

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

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

Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and					, , , , , , , , , , , , , , , , , , , ,	(7)
	membership fees received. (Do not			1			
	include any "unusual grants.")						
2	Tax revenues levied for the organ-	122					
	ization's benefit and either paid to						
	or expended on its behalf		İ				
3							
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
	The portion of total contributions		1411992-7		1000		
	by each person (other than a	1000000	A CONTRACTOR	100		and the second	
	governmental unit or publicly	Gillian			138		
	supported organization) included	400000					
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)			1986			
6	Public support. Subtract line 5 from line 4.	1 1 1 1 1 1 1			6.30	(B) (S) (S)	
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10	Barrier 1					
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for				5		
_	organization, check this box and stop						▶□
	ction C. Computation of Publi					, ,	
	Public support percentage for 2017 (li					14	%
	Public support percentage from 2016					15	. %
16a	33 1/3% support test - 2017. If the o	-				DESCRIPTION OF STREET STREET,	
	stop here. The organization qualifies						
b	33 1/3% support test - 2016. If the o						
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac-						
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances test						0% or
	more, and if the organization meets th						
	organization meets the "facts-and-circ						
18	Private foundation. If the organization	n did not check a l	box on line 13, 16	a, 16b, 17a, or 17b		a B of bias	
					Sche	dule A (Form 990	or 990-EZ) 2017

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

_	qualify under the tests listed by	elow, please comp	olete Part II.)							
_	Section A. Public Support									
	endar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received. (Do not include any "unusual grants.")	51,243.	47,914.	64,023.	63,535.	72,101.	298,816.			
2	Gross receipts from admissions,	31,243.	47,514.	04,025.	05,555.	72,101.	230,010.			
2	merchandise sold or services per-									
	formed, or facilities furnished in									
	any activity that is related to the organization's tax-exempt purpose	863,423.	833,906.	947,219.	773,586.	842,977.	4,261,111.			
3	Gross receipts from activities that		,		,					
	are not an unrelated trade or bus-									
	iness under section 513	35,250.	61,592.	86,457.	66,639.	38,359.	288,297.			
4	Tax revenues levied for the organ-									
	ization's benefit and either paid to									
	or expended on its behalf									
5	The value of services or facilities									
	furnished by a governmental unit to									
	the organization without charge									
6	Total. Add lines 1 through 5	949,916.	943,412.	1,097,699.	903,760.	953,437.	4,848,224.			
7a	Amounts included on lines 1, 2, and					750 W.S. 157 SET 187 W.				
	3 received from disqualified persons	37,000.	35,000.	35,000.	35,000.	35,000.	177,000.			
b	Amounts included on lines 2 and 3 received from other than disqualified persons that									
	exceed the greater of \$5,000 or 1% of the				3		_			
	amount on line 13 for the year	27 000	25 000	25 222	25 222	25 222	0.			
	Add lines 7a and 7b	37,000.	35,000.	35,000.	35,000.	35,000.	177,000.			
	Public support. (Subtract line 7c from line 6.)			es es es establishment			4,671,224.			
	ction B. Total Support					0 0 0 a				
	ndar year (or fiscal year beginning in)	(a) 2013 949, 916.	(b) 2014 943,412.	(c) 2015 1,097,699.	(d) 2016 903, 760.	(e) 2017 953, 437.	(f) Total			
	Amounts from line 6 Gross income from interest,	949,910.	943,414.	1,097,699.	903,760.	953,437.	4,848,224.			
iua	dividends, payments received on									
	securities loans, rents, royalties, and income from similar sources	65,313.	72,808.	82,482.	86,433.	82,195.	389,231.			
h	Unrelated business taxable income	03,313.	72,000.	02,402.	00,433.	02,155.	307,231.			
D	(less section 511 taxes) from businesses									
	acquired after June 30, 1975									
С	Add lines 10a and 10b	65,313.	72,808.	82,482.	86,433.	82.195.	389,231.			
11	Net income from unrelated business			,	,					
	activities not included in line 10b, whether or not the business is									
	regularly carried on			w.						
12	Other income. Do not include gain									
	or loss from the sale of capital assets (Explain in Part VI.)									
13	Total support. (Add lines 9, 10c, 11, and 12.)	1,015,229.	1,016,220.	1,180,181.	990,193.	1,035,632.	5,237,455.			
14	First five years. If the Form 990 is for	the organization's	first, second, third	l, fourth, or fifth ta	x year as a section	n 501(c)(3) organiz	ation,			
	check this box and stop here									
	tion C. Computation of Publi									
	Public support percentage for 2017 (li					15	89.19 %			
	Public support percentage from 2016					16	89.35 %			
_	tion D. Computation of Inves						7.42			
						18	7.10 %			
	33 1/3% support tests - 2017. If the					50				
	more than 33 1/3%, check this box ar						▶ X			
	33 1/3% support tests - 2016. If the line 18 is not more than 33 1/3%, che									
	Private foundation. If the organization									
	a.c iodiidadioni ii tile organizatioi	I GIG HOL CHECK & L	on on mic 14, 13a	, or loo, check th	של שלא מווע שלב וווא					

Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2 3a		
3b		
3с		
4a		
4b		
4c		
5a 5b		
5c		
6		
8		
9a		
9b		
9c		
10a	1	
10b		

Pa	art IV Supporting Organizations (continued)			age o
	[CONTINUEQ)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		165	140
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
		1a		
b	A Coult	1b		\vdash
	A CECCO AND A DESCRIPTION OF THE PROPERTY OF T	1c	 	
	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			1,10
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	ction D. All Type III Supporting Organizations	_		
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
		2	/555/6453/65	
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		3		
Sec	ction E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruc	tions	i).	
2	Activities Test. Answer (a) and (b) below.	[Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	а		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	b	A CONTRACTOR OF THE	
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	а		
b				
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	ь		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	Nov. 20, 1970 (explain in	Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must co			
Sec	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		
_2	Recoveries of prior-year distributions	2		
_3	Other gross income (see instructions)	3		
_4	Add lines 1 through 3	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7	MARK TO THE PARTY OF THE PARTY	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see		3.13.500	Lange Committee of the
	instructions for short tax year or assets held for part of year):			1000 - 27 18
а	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
2.00	Total (add lines 1a, 1b, and 1c)	1d	1	
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):	54.77		
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8	V-10-32-02-00-00-00-00-00-00-00-00-00-00-00-00	
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2	77-13	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionall		ed Type III supporting ora	anization (see
	instructions).		,	•

Schedule A (Form 990 or 990-EZ) 2017

Pa	rt V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	C 2000303 Page 7
Sect	ion D - Distributions		(continuca)	Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	ses of supported organization	is	
4	Amounts paid to acquire exempt-use assets		*	
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
_ 7	Total annual distributions. Add lines 1 through 6.		-	
8	Distributions to attentive supported organizations to which t	he organization is responsive	9	
	(provide details in Part VI). See instructions.			
_9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6	la auto		
2	Underdistributions, if any, for years prior to 2017 (reason-	The state of the s		
8	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
a				
	From 2013			
_	From 2014			
	From 2015			
e	From 2016			
f_	Total of lines 3a through e			
	Applied to underdistributions of prior years			
-	Applied to 2017 distributable amount			
_ <u>i</u>	Carryover from 2012 not applied (see instructions)	10 (10 (10 (10 (10 (10 (10 (10 (10 (10 (
<u>j</u> _	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount	Production of the second of th		
	Remaining underdictributions for years prior to 2017, if			A CONTRACTOR OF THE PARTY OF TH
5	Remaining underdistributions for years prior to 2017, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
6	than zero, explain in Part VI. See instructions. Remaining underdistributions for 2017, Subtract lines 3h			
0	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			22 22 32
•	and 4c.			
8	Breakdown of line 7:			
	Excess from 2013			
	Excess from 2014	a district		
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			2 20 W 21 P 2 W 21 W 21 W 21 W 21 W 21 W 21
			C-l1-1- A /F	orm 990 or 990-EZ) 2017

Schedule A (Form 990 or 990-EZ) 2017

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Inspection

Name of the organization

MERCY CONFERENCE AND RETREAT CENTER

Employer identification number 26-2680503

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts.Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in		STATE THE STATE OF
	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor a		- · ·
	for charitable purposes and not for the benefit of the donor		
TD=	impermissible private benefit?		Yes No
	rt II Conservation Easements. Complete if the or		Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or e		orically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
0	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali day of the tax year.	ned conservation contribution in the form	Held at the End of the Tax Year
2	Total number of conservation easements		
h	To the Language residence to the contract of t		
c	Number of conservation easements on a certified historic str	ructure included in (a)	
d	Number of conservation easements included in (c) acquired		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	
	year▶	,,	
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements i	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing con	servation easements during the year
			
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserva	tion easements during the year
	> \$		
8	Does each conservation easement reported on line 2(d) above		FF 90 61 200006 200006
_	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservati		
	include, if applicable, the text of the footnote to the organizar	tion's financial statements that describes	the organization's accounting for
Pai	t III Organizations Maintaining Collections o	f Art. Historical Treasures, or O	ther Similar Assets
	Complete if the organization answered "Yes" on Form		alei elilliai Assets.
	If the organization elected, as permitted under SFAS 116 (AS		ment and halance sheet works of art
	historical treasures, or other similar assets held for public exh		
	the text of the footnote to its financial statements that descri		ince of public convices, provides, in a dictain,
b	If the organization elected, as permitted under SFAS 116 (AS		and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		
	relating to these items:	continuation to the management of the management of the per-	, p
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
2	If the organization received or held works of art, historical treatments		
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	, Maria 1971 - 1
а	Revenue included on Form 990, Part VIII, line 1		• \$
h	Assets included in Form 990, Part X		\$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017

28,333.

e Other

c Leasehold improvements

d Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

44,086.

Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A) MERCY INVESTMENT SERVICES	2 100 010		
(B) (POOLED INVESTMENT FUNDS)	3,182,810.	END-OF-YEAR MARKE	T VALUE
(C)			
(D)			
(E)		1878	
(H)			2.03
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	3,182,810.		
Part VIII Investments - Program Related.	0,202,0200	Carra, Dual tradicipat or attest. Production of Specification (1981) in 1983 of	
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990. Part X line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	nd-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets.		THE PROPERTY OF THE PROPERTY O	to the state of th
	on Form 000 Dort IV line:	11d Coo Forms 000 Doub V line 15	
Complete if the organization answered "Yes" (a) [Description	11d. See Form 990, Part X, line 15.	(b) Book value
(1)		****	(b) DOOK Value
(1)	***		
(3)			
(4)		-	
(5)		- 500	
(6)	***	94.	
(7)		E	
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)	>	
Part X Other Liabilities.			
Complete if the organization answered "Yes" of			5.
1. (a) Description of liability	(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
<u>(4)</u>		English Control of the Control of th	
(5)			
(6) (7)			
(7)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)		
2. Liability for uncertain tax positions. In Part XIII, provide t		the organization's financial statements	that reports the

732053 10-09-17

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2017

Schedule D	(Form 990) 2017	MINCI	COMPENSINCE	MIND	VEIVEVI	CENTER	20-2000303
Part XI	Reconciliation o	f Revenue	per Audited Fin	ancial	Statements	With Revenue per	Return.
	Complete if the organ	ization answ	ered "Yes" on Form 99	n Part	IV line 12a		

	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		The second secon		_
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
C	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements 1 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments 2b c Other losses 2c d Other (Describe in Part XIII.) Add lines 2a through 2d 2e Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

GENERALLY ACCEPTED ACCOUNTING PRINCIPLES ("GAAP") PRESCRIBE A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. FOR THOSE BENEFITS TO BE RECOGNIZED, A TAX POSITION MUST BE MORE-LIKELY-THAN NOT TO BE SUSTAINED UPON EXAMINATION BY TAXING AUTHORITIES. MANAGEMENT BELIEVES THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS TO BE ACCOUNTED FOR IN THE FINANCIAL STATEMENTS IN ACCORDANCE WITH GAAP AS OF JUNE 30, 2018. THE CENTER'S FORM 990 INFORMATIONAL RETURNS ARE SUBJECT TO EXAMINATION BY TAXING AUTHORITIES GENERALLY FOR THREE YEARS AFTER FILING.

Sche	dule D	(Form 990	0) 2017		MER	GA GO	NFERE	NCE	ANI) RETREAT	CENTER	26-268	0503	Page 5
Parl	XIII	Supple	menta	I Infor	mation	1 (continu	ed)							
PAR	T V	7, 4								***				
THE	IN	TENDE	D US	E OF	THE	ENDO	WMENT	IS	TO	GENERATE	INVESTMENT	INCOME	ТО	
OFF	SET	LOSS	ES F	ROM	OPER/	ATING	ACTI	VIT:	IES.	·				
							-							

		-W101												
		*												

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

2017
Open to Public Inspection

Name of the organization

MERCY CONFERENCE AND RETREAT CENTER

Employer identification number 26-2680503

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

OF MERCY OF THE AMERICAS, PROVIDES A TRANQUIL ENVIRONMENT OF

HOSPITALITY AND HEALING, WHERE GROUPS AND INDIVIDUALS OF ALL FAITHS CAN

ENGAGE IN PRAYER, REFLECTION AND DIALOGUE FOR PERSONAL, COMMUNAL AND

GLOBAL TRANSFORMATION.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PERSONAL, COMMUNAL AND GLOBAL TRANSFORMATION.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

ENVIRONMENTAL/ECOLOGICAL AWARENESS AND EDUCATION ARE ELEMENTS OF MANY

OFFERINGS. MCRC COLLABORATES WITH INDIVIDUALS AND ORGANIZATIONS TO

ENSURE THAT PROGRAMMING REMAINS RELEVANT AND RESPONSIVE TO AN

EVER-CHANGING POPULATION.

FORM 990, PART VI, SECTION A, LINE 6:

THE GOVERNING BODY (SISTERS OF MERCY SOUTH CENTRAL COMMUNITY) RESERVES THE RIGHT TO APPROVE ALL ACTIONS OF THE BOARD OF DIRECTORS, INCLUDING BUT NOT LIMITED TO THE APPOINTMENT OF MEMBERS OF THE BOARD.

FORM 990, PART VI, SECTION A, LINE 7A:

THE GOVERNING BODY (SISTERS OF MERCY SOUTH CENTRAL COMMUNITY) RESERVES THE RIGHT TO APPROVE ALL ACTIONS OF THE BOARD OF DIRECTORS, INCLUDING BUT NOT LIMITED TO THE APPOINTMENT OF MEMBERS OF THE BOARD.

FORM 990, PART VI, SECTION A, LINE 7B:

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

Schedule O (Form 990 or 990-EZ) (2017)

Name of the organization Employer identification number MERCY CONFERENCE AND RETREAT CENTER 26-2680503 THE GOVERNING BODY (SISTERS OF MERCY SOUTH CENTRAL COMMUNITY) RESERVES THE RIGHT TO APPROVE ALL ACTIONS OF THE BOARD OF DIRECTORS, INCLUDING BUT NOT LIMITED TO THE APPOINTMENT OF MEMBERS OF THE BOARD. FORM 990, PART VI, SECTION B, LINE 11B: FORM 990 HAS BEEN PROVIDED TO ALL BOARD MEMBERS BEFORE FILING AND A COPY WILL BE PROVIDED TO SISTERS OF MERCY. FORM 990, PART VI, SECTION B, LINE 12C: THERE WERE NO ACTIONS TAKEN DURING THE FISCAL YEAR WHICH WOULD HAVE PROVIDED A CONFLICT OF INTEREST FOR ANY BOARD MEMBER. FORM 990, PART VI, SECTION B, LINE 15: THE EXECUTIVE COMMITTEE SURVEYED OTHER SIMILAR NON-PROFITS FOR EXECUTIVE DIRECTOR AND BUSINESS MANAGER SALARY RANGES. FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS, ALL BOARD-ENACTED POLICIES AND FINANCIAL STATEMENTS ARE AVAILABLE BY REQUEST. PART XII, LINE 2C: THE BOARD OF DIRECTORS OVERSEES THE SELECTION OF THE INDEPENDENT ACCOUNTANT PERFORMING THE REVIEW. THE BOARD OF DIRECTORS ALSO ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE REVIEW.

SCHEDULE R (Form 990)

Name of the organization Department of the Treasury Internal Revenue Service

Part I

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

Open to Public Inspection 2017

OMB No. 1545-0047

Employer identification number 26-2680503

Go to www.irs.gov/Form990 for instructions and the latest information. MERCY CONFERENCE AND RETREAT CENTER

Direct controlling Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. Œ End-of-year assets (e) Total income Ð Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Legal domicile (state or foreign country) <u>ပ</u> Primary activity **9** Name, address, and EIN (if applicable) of disregarded entity Part II

(a)	(q)	(0)	(p)	(e)	(4)	(6)	
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 512(b)(13)	2(b)(13) led
of related organization		foreign country)	section	status (if section	entity	entity?	
				501(c)(3))		Yes	2
SISTERS OF MERCY SOUTH CENTRAL COMMUNITY -					SISTERS OF MERCY		
11-3816411, 101 MERCY DRIVE, BELMONT, NC					OF THE AMERICA'S		
20812	RELIGIOUS COMMUNITY	NORTH CAROLINA	501(C)(3)		INC.		×
MERCY INVESTMENT SERVICES, INC 26-3224636					SISTERS OF MERCY		
2039 N. GEYER ROAD					OF THE AMERICA'S,		
ST. LOUIS, MO 63131	INVESTMENT SERVICES	MISSOURI	501(C)(3)	1	INC.		×
MIA-USA FUNDRAISING, INC 46-1959457					SISTERS OF MERCY		
2039 N. GEYER ROAD	SUPPORT ORGANIZATION OF				OF THE AMERICA'S.		
ST. LOUIS, MO 63131	SISTERS OF MERCY	MISSOURI	501(C)(3)	11 A TYPE I	INC.		×

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

Schedule R (Form 990) 2017

Page 2

26-2680503

Schedule R (Form 990) 2017 MERCY CONFERENCE AND RETREAT CENTER

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Part III

General or Percentage managing ownership partner? Schedule R (Form 990) 2017 Yes No Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. Section 512(b)(13) controlled entity? 图 Percentage ownership Yes 6 <u>(</u>P Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets \equiv (g Yes No Disproportionate allocations? Ξ Share of total income Share of end-of-year assets (g) Type of entity (C corp, S corp, or trust) **(e)** Share of total income Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) 0 Legal domicile (state or foreign country) <u>ပ</u> Direct controlling entity <u>g</u> Primary activity 9 (c)
Legal
domicile
(state or
foreign Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization <u>a</u> 732162 09-11-17 Part IV

Page 3

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				>	Yes
the following transactions	vith one or more r	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	in Parts II-IV?		1980
Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a	×
Gift, grant, or capital contribution to related organization(s)				1b	^
Gift, grant, or capital contribution from related organization(s)				10 2	×
***************************************				1d	×
				1e	×
					ì
0		***************************************		= ;	4 >
				- 1a	4 >
				¥	×
Lease of facilities, equipment, or other assets to related organization(s)					×
Lease of facilities, equipment, or other assets from related organization(s)				×	
Performance of services or membership or fundraising solicitations for related organization(s)	ation(s)			\vdash	×
Performance of services or membership or fundraising solicitations by related organization(s)	ation(s)			1m X	
Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	(s)			-	×.
				위	
				₽ ~	×
Reimbursement paid by related organization(s) for expenses				1q >	
				11.	×
				18	×
r information on w	must complete t	is line, including covered	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.		
	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	ved	
COMMUNITY	υ	35,000.	,000.GRANT LETTER		
COMMUNITY	М	328,875.	875.LEASE AGREEMENT		
COMMUNITY	ц	34,219.	219.INVOICES		
	М	15,063.	INVESTMENT/CONSULTING FEES	S	
COMMUNITY	М	375,966.IN	IN KIND DONATION		
	ם	27,180.	27,180.SERVICES AGREEMENT		
	34		1	Form 9	90) 20

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(7) SISTERS OF MERCY SOUTH CENTRAL COMMUNITY	Ø	19,647.	19,647.INVOICES
(8) MIA-USA FUNDRAISING, INC.	0	10,350.	10,350.SERVICES AGREEMENT
(6)			
(10)			
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Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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.

(K)	Percentage ownership																													Schedule R (Form 990) 2017
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(F)	-i 55	Yes No			L				-				-																	
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(6)	Share of end-of-year	assets																												
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(e)	Are all partners sec. 501(c)(3)	Yes No											+													\exists				
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	Predominant income pa (related, unrelated, excluded from tax under page 2000)	12-514																												
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