

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

A For the 2009 calendar year, or tax year beginning 02-01-2009 and ending 01-31-2010

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization THE MENNONITE INC Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1700 S MAIN STREET City or town, state or country, and ZIP + 4 GOSHEN, IN 46526	D Employer identification number 35-2157514 E Telephone number (574) 535-6051 G Gross receipts \$ <u>561,392</u>
F Name and address of principal officer: EVERETT THOMAS 1700 S MAIN STREET GOSHEN, IN 46526		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		J Website: WWW.THEMENNONITE.ORG	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 2002	M State of legal domicile: IN

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: THE MISSION OF THE MENNONITE IS TO HELP READERS GLORIFY GOD, GROW IN FAITH, AND BECOME AGENTS OF HEALING AND HOPE IN OUR WORLD. THE MENNONITE IS THE OFFICIAL PERIODICAL FOR MENNONITE CHURCH USA, A CHRISTIAN DENOMINATION IN THE UNITED STATES.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	<u>6</u>
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	<u>6</u>
	5	Total number of employees (Part V, line 2a)	5	<u>6</u>
	6	Total number of volunteers (estimate if necessary)	6	<u>7</u>
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	<u>8,621</u>
b	Net unrelated business taxable income from Form 990-T, line 34	7b	<u>1,394</u>	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	111,753	93,460
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	524,760	460,655
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,063	6,934
	12	Total revenue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,257	0
			643,833	561,049
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,000	0
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	247,843	232,203
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) <u>4,374</u>		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	397,389	290,549
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	646,232	522,752	
19	Revenue less expenses. Subtract line 18 from line 12	-2,399	38,297	
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	277,041	274,564
	21	Total liabilities (Part X, line 26)	201,094	160,321
22	Net assets or fund balances. Subtract line 21 from line 20	75,947	114,243	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	***** Signature of officer	2010-10-06 Date	
	EVERETT THOMAS CEO Type or print name and title.		

Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 CROWE HORWATH LLP 70 West Madison Street Suite 700 Chicago, IL 606024903			EIN Phone no. (312) 899-7000

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