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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2009 Open to Public inspection

_					The state of the s
	or the 2009 heck if applicable	calendar year, or tax year beginning , and ending e Please C Name of organization	·	D Employ	/er identification numbe
	ddress change	use IRS INSTITUTE OF LUTHERAN THEOLOGY		5	er identification numbe
$\overline{}$	ame change	label or print or Doing Business As	 	26-:	1251815
\equiv	· ·	type Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telepho	ne number
H	ital return	See 910 4TH ST	1		
i Li	ermination	Instruc- City or town, state or country, and ZIP + 4		G Gross receip	ots 175,32
<u></u> ^	mended return	tions BROOKINGS SD 57006	<u></u>		
A	pplication pendii	ng F Name and address of principal officer DENNIS BIELFELDT			group return for Yes X
		504 8TH ST		affiliates	uffiliates 🗔 🖂 .
		BROOKINGS SD 57006		included	attach a list. (see instructions)
1 1	ax-exempt st]	,
<u>J </u>	Nebsite: ▶	INSTITUTEOFLUTHERANTHEOLOGY.ORG			exemption number
***************************************		tion X Corporation Trust Association Other L	Year of formation 2	2007 <u> </u>	M State of legal domicile S
P		Summary			
	•	describe the organization's mission or most significant activities			
8	SE	E SCHEDULE O			
E I					
ᇤ					
Š	2 Check	this box ▶ ☐ if the organization discontinued its operations or disposed of more than	25% of its net as	sets	
Activities & Governance	3 Numb	er of voting members of the governing body (Part VI, line 1a)		3	9
ies	4 Numb	er of independent voting members of the governing body (Part VI, line 1b)		4	9
ξ	5 Total	number of employees (Part V, line 2a)		5	6
		number of volunteers (estimate if necessary)		_6	
		gross unrelated business revenue from Part VIII, column (C), line 12			
	b Net ur	nrelated business taxable income from Form 990-T, line 34	Prior Ye	7b	Current Year
.	8 Contri	ibutions and grants (Part VIII, line 1h)		9,212	147,36
i <u>a</u>		am service revenue (Part VIII, line 2g)		5,625	27,96
Reven	•	tment income (Part VIII, column (A), lines 3, 4, and 7d)			
52		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			
ŀ		revenue – add lines 8 through 11 (nuscenual Part VIII, column (A), line 12)	18	4,837	175,32
	13 Grant	s and similar amounts paid (Part IX, column (A), lines 1-3)			
İ	14 Benef	fits paid to or for members (Part IX, column (A), line			<u></u>
ဖွ	15 Saları	ies, other compensation சூர்மில் சூர்மில் இது மிரியாக (A), lines 5–10)	9	8,719	89,94
Expenses	16a Profe	ssional fundraising fees (Part IX, column (A), line 11e2 fundraising expenses (Part IX, column (D), line 25) expenses (Part IX, column (A), lines 1 a l.d., 11-24f)			
ᇵ	b Total	fundraising expenses (Part IX column (D) line 25)			
ш	17 Other	expenses (Part IX, column (A), lines (11a-11d-111-241)		4,100	67,75
	18 Total	expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		2,819	157,70
- 50	19 Reve	nue less expenses Subtract line 18 from line 12	Beginning of C	2,018	<u>17,62</u>
S S	20 Total	assets (Part X, line 16)		.8,160	End of Year 33, 16
Assets or	20 10tal	liabilities (Part X, line 16)		4,127	1,51
E S		ssets or fund balances Subtract line 21 from line 20	1	4,033	31,65
P	art II	Signature Block			
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedu	les and statements.	and to the bes	at of my knowledge
		and belief it is true, correct, and complete Declaration of preparer (other than officer) is based on all	information of which	n preparer has	any knowledge
Sig	n	Dellett			1-1-2016
Hei	re	Signature of officer		Date	•
	l				
		Type or print name and title			
_	<u>. </u>	Preparer's Date	Chec	kıf	Preparer's identifying numb (see instructions)
Pai			28/10 self-	oyed 🕨 🗌	503-84-859
	parer's	BRIAN J. HILDEBRANT, CPA. P.C.		EIN D	46 00001
Us	e Only	f self-employed), f self-employed),	BOX 438	Phone	
		address, and ZIP + 4 BROOKINGS, SD 57006			605-697-640
May	the IRS dis	scuss this return with the preparer shown above? (see instructions)			Yes
For	Privacy Ac	t and Paperwork Reduction Act Notice, see the separate instructions.	~ · ~		Form 990 (20
DAA	•	-	917.	1/1	`

917-18

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

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SEE	- 51	ι:н	M. I 3		. P.	()

				Form 990 (2009)
40	Total program service expenses ▶	157,705		
	(Expenses \$		nue \$	
4d	Other program services (Describe in Scho	edule O)		
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4a T' S' C' Al	services? If "Yes," describe these changes on Sched Describe the exempt purpose achievement Section 501(c)(3) and 501(c)(4) organizatio allocations to others, the total expenses, and (Code) (Expenses \$ O FULLFILL ITS MISSIO CRIPTURALLY-GROUNDED, PREPARATION HRISTIAN LEADERSHIP C DULT CHRISTIAN EDUCAT	tule O ts for each of the organization's three largest program ser ons and section 4947(a)(1) trusts are required to report the ind revenue, if any, for each program service reported 157,705 including grants of \$ N THE INSTITUTE OFFERS: SOLIDLY LUTHERAN, PASTORAL ERTIFICATION PROGRAMS. ION PPORTUNITIES FOR CLERGY	vices by expenses	Yes X No
	If "Yes," describe these new services on S Did the organization cease conducting, or i	chedule O make significant changes in how it conducts, any program	1	
	the prior Form 990 or 990-EZ?			Yes X No
2	Did the organization undertake any signific	ant program services during the year which were not liste	d on	

	artiv 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,"	ا ا	v	
	complete Schedule A		X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	^	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		l	x
	candidates for public office? If "Yes," complete Schedule C, Part I	3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			X
_	Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	5	i	
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III			
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"	6		x
_	complete Schedule D, Part I	•		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	8		x
^	complete Schedule D, Part III Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
9	· · · · · · · · · · · · · · · · · · ·			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	9		х
10	complete Schedule D, Part IV	-		
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
• •	VII, VIII, IX, or X as applicable	11	x	
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI			
_	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			
	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			
	Did the organization report an amount for other assets related 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			
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
	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? If "Yes," complete Schedule D, Part X			
12				
	Schedule D, Parts XI, XII, and XIII	12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	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,		ļ	İ
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	 	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	İ		
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	ऻ	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	1		
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	<u> </u>	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	 	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?]
	If "Yes," complete Schedule G, Part III	19	↓	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X

Form 990 (2009) INSTITUTE OF LUTHERAN THEOLOGY 26-1251815

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	ļ		
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		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," answer lines			
	24b through 24d and complete Schedule K If "No," go to line 25	24a		<u> </u>
þ		24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
þ	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-EZ? If "Yes," complete Schedule L, Part I	25b		<u>X</u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	ĺ		
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete		ļ	
	Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a	İ		
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c	L	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	ł		
	conservation contributions? If "Yes," complete Schedule M	30	1	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	ł		
	Part I	31	<u> </u>	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	ł		
	Schedule N, Part II	32	<u> </u>	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	İ	l	
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	L	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	1	1	
	III, IV, and V, line 1	34	<u> </u>	X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	1		
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	1]	
	organization? If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	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,		1	
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	1		_
	19? Note. All Form 990 filers are required to complete Schedule O	38		X
		For	_m 990	(2009)

<u>Pa</u>	IT V Statements Regarding Other IRS Fillings and Tax Compliance				
4_	Enter the number reported in Pay 2 of Form 1000 Applied Comments and Transmitted of	ı		Yes	No
ıa	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a 7			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and rep				
·	gaming (gambling) winnings to prize winners?	ontable	1c	ĺ	X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	i 1	· · · ·		
	Statements, filed for the calendar year ending with or within the year covered by this return	2a 6			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur		2b	x	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see				
	instructions)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	d by			
	this return?		3a		_X_
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other fin	ancial	i l		
	account)?		4a		<u> </u>
b	If "Yes," enter the name of the foreign country				
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign	Bank			
_	and Financial Accounts		_		7.7
5a		10	5a		$\frac{\mathbf{x}}{\mathbf{x}}$
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transactiff "Yea" to line 5e or 5h, did the organization file 5e or 8000 T. Disclours by Tay Event Fatty Research		5b		
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regard Prohibited Tax Shelter Transaction?	araing	E.	J	
6a		Δ.	5c		
ua	organization solicit any contributions that were not tax deductible?	G	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or	"		
	gifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g	joods			
	and services provided to the payor?		7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s			
	required to file Form 8282?	f 1	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
θ	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	ersonal			
	benefit contract?	10	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri		7f		
g h	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C		<u>7g</u>		
"	required?	, d5	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		 '''		
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring				
	organization, have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1		
11	Section 501(c)(12) organizations. Enter	I I			
a	Gross income from members or shareholders	11a	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
40	amounts due or received from them)	11b	1	1	ŀ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a	 	
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	<u> </u>	000	(2009)
			ron		(2003)

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.

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 9	_		
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		X
Ъ	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
_	the year by the following			
a	The governing body?	8a	X	
ь	Each committee with authority to act on behalf of the governing body?	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			₹.
500	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O tion B. Policies (This Section B requests information about policies not required by the Internal	9		<u> </u>
	renue Code.)			
	Cride Oction,		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	163	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	100		 -
-	affiliates, and branches to ensure their operations are consistent with those of the organization?	10ь		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	102		
	form?	11		x
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	· · · · · · ·	X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	1	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	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	<u> </u>	X_
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
<u></u>	the organization's exempt status with respect to such arrangements?	16b	<u> </u>	
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE Section 5104 requires an ergographic to make the Forms 1923 (or 1924 if applicable), 990, and 990 T (504(a)/3)a and 990 T			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply			
10	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
20	policy, and financial statements available to the public State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization			
	organization P			

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees See instructions for definition of "key employee"

|X| Check this box if the organization did not compensate any current officer, director, or trustee

- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A) Name and Title	(B) Average			(0	;)	hat a		(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
DENNIS BIELFELDT PROVOST, CEO								0	0	0
DOUG DILLNER BOARD MEMBER								0	0	0
FRED SCHICKEDANZ BOARD MEMBER								0	0	0
G.BARRY ANDERSON BOARD MEMBER								0	0	0
HANS HILLERBRAND BOARD MEMBER								0	0	0
JACK PREUS BOARD MEMBER								0	0	0
KIP TYLER BOARD MEMBER								0	0	0
PAUL ERICKSON BOARD MEMBER	,							0	0	0
UWE SIEMON-NETTO BOARD MEMBER			j 		_			0	0	0
				_				<u>-</u> -		
			<u> </u>	_			_			
				_			-			
		-		-	_		-			
		-		-		-				
		-	_			-				
	-	-				-				

Page 8

Form **990** (2009)

Par	VII Section A. Officers	, Directors, Trus	stees	s, Ke	y Er	nplo	yees	, an	d Highest Compensated	Employees (continued)	т			
	(A) Name and Title	(B) Average hours per	⊢	_	chec		hat a	_	(D) Reportable compensation	(E) Reportable compensation		(F) Estima amoun	of	
		week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	or a	othermpens from the ganizated nd rela	ation ne ition ited	
										·				_
												_		
						_		_	_		<u></u>			
				ļ.,							<u> </u>			<u>-</u> .
											<u> </u>			
					ļ	<u> </u>	1				1			
		1			-	-		_			 			
		1	<u> </u>	-				_			 			
			-	<u> </u>	<u> </u>		İ	<u> </u>			 			
			 	<u> </u>	-		-	<u> </u>			-			
		<u> </u>	\perp		_		-				+			
1b	Total		<u> </u>	<u> </u>	<u> </u>		<u> </u>	>			<u> </u>			
	Total number of individuals (in reportable compensation from			_	tho	se lis	sted a	abo\ 	ve) who received more that	n \$100,000 in				T
3	Did the organization list any f								oyee, or highest compensa	ated	[3	Yes	No X
4	employee on line 1a? If "Yes, For any individual listed on lin the organization and related of individual	ne 1a, is the sum	of re	epor	table	cor	npen	sati	on and other compensationes," complete Schedule J fo	n from or such		4		x
5	Did any person listed on line services rendered to the orga	1a receive or action? If "Yes	crue	com	pen: ete S	satio Sche	n fro dule	m a J fo	ny unrelated organization f r such person	or		5		х
Sec 1	tion B. Independent Contrac Complete this table for your f	ive highest comp	pens	ated	ınde	pen	dent	con	tractors that received more	than \$100,000 of				
	compensation from the organ	nization (A) d business address							Descr	(B) iption of services		ca	(C) ompensa	ation_
										- · · · · · · · · · · · · · · · · · · ·				
									 				.,	
2	Total number of independent						ited t	o th	ose listed above) who rece	elved				

Pa	rt VI	II Statement of Reve	nue	,					
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
និស	1a	Federated campaigns	1a			- · · · · · · · · · · · · · · · · · · ·			
E I		Membership dues	1b						
₽,E		Fundraising events	1c						
		Related organizations	1d						
B,S		Government grants (contributions)	10					ĺ	
Sign		All other contributions, gifts, grants,	-:-						
いま	•	and similar amounts not included above	1f		147,365				
들	а	Noncash contributions included in lines 1a-		\$					
유	-	Total. Add lines 1a-1f		•	▶ 1	147,365			
Program Service Revenue Contributions, gifts, grants and other similar amounts					Busn. Code				
le l	2a	PROGRAM SERVICE REV	ENUE			27,960	27,960		
æ	b								
<u>.</u> 2	c					,			
Š	d				<u> </u>				
Ĕ	е								
<u> </u>	f	All other program service reve	nue						
¥		Total. Add lines 2a-2f			•	27,960			
\Box		Investment income (including	dıvıder	nds, intere	est, and				
}		other similar amounts)			▶				
	4	Income from investment of tax	-exem	pt bond p	oroceeds ▶				-
	5	Royalties							
		(ı) Real		(II) F	Personal				
	6a	Gross Rents							
	b	Less rental exps							
	C	Rental inc or (loss)							
	d	Net rental income or (loss)			•				
	7a	Gross amount from sales of assets (i) Securitie	s	(11)) Other				
		other than inventory							
	b	Less cost or other							
		basis & sales exps		L					
	С	Gain or (loss)							
	d	Net gain or (loss)			•				
	8a	Gross income from fundraising even	ents						
nue		(not including \$		Ì					
9.0		of contributions reported on line 10	;)						
ج		See Part IV, line 18	а						
Other Reven	b	Less direct expenses	b						
0	С	Net income or (loss) from fund	draisin	g events	<u> </u>				
	9a	Gross income from gaming activities	es						
	ļ	See Part IV, line 19	а						
	b	Less: direct expenses	b	<u> </u>					
	c	Net income or (loss) from gar	ning a	tivities	<u> </u>				
	10a	Gross sales of inventory, less	;						
		returns and allowances	а						
	b	Less cost of goods sold	b						
	<u> </u>	Net income or (loss) from sale	es of ır	ventory	<u> </u>				
		Miscellaneous Revenu	e		Busn. Code				
	11a								
	b								
	С								
	d	All other revenue			L				
	е	Total. Add lines 11a-11d			•				
	12	Total Revenue. See instructi	ons.		•	175,325	27,960) C) 0

Form 990 (2009)

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must c				
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and general expenses	(D) Fundraising expenses
	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	-			
_	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22		· · ·	······································	
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified		ļ		İ
	persons (as defined under section 4958(f)(1)) and		j		
	persons described in section 4958(c)(3)(B)	06.040	06.040	. ,,,	
7	Other salaries and wages	86,049	86,049		
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	2 222	- 2 000		
10	Payroll taxes	3,900	3,900	<u></u>	
11	Fees for services (non-employees)				
а	Management				
b	Legal	64	64		
С	Accounting	265	265		
d	Lobbying				
θ	Professional fundraising services See Part IV, line 17				
f	Investment management fees		24 242		
g	Other	31,218	31,218		
12	Advertising and promotion	775	775		
13	Office expenses	7,764	7,764		
14	Information technology	6,520	6,520		
15	Royalties				
16	Occupancy	7,107	7,107	*** •	
17	Travel	9,170	9,170		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	4 450	4 400		
19	Conferences, conventions, and meetings	4,473	4,473		
20	Interest	.==			
21	Payments to affiliates			· · · · · · · · ·	-
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)		400		
а	DONATIONS	400	400		
b					
C					<u> </u>
d					
0					
f	All other expenses	4=====	4 22 24-		
25	Total functional expenses. Add lines 1 through 24f	157,705	157,705		
26					
	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation				Form 990 (2009)
DAA					Form 33U (2009)

	art >	Balance Sheet		(4)		
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing		16,324	1	31,084
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	····
	4	Accounts receivable, net		1,836		2,082
	5	Receivables from current and former officers, directors	trustees kev			
	Ĭ	employees, and highest compensated employees Cor				
	l	Schedule L	inplote rate if or		5	
	6	Receivables from other disqualified persons (as define	d under section			
	•	4958(f)(1)) and persons described in section 4958(c)(3				
		Part II of Schedule L	,(a) complete		6	
şţ	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
Ä	9	Prepaid expenses and deferred charges			9	
	1 1	Land, buildings, and equipment cost or	1 1		-	
		other basis Complete Part VI of Schedule D	10a			
	Ь	Less accumulated depreciation	10b		10c	
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line	34)	18,160		33,166
	17	Accounts payable and accrued expenses		785		1,327
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
Š	21	Escrow or custodial account liability Complete Part IV	of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trus				, <u></u>
Ē		employees, highest compensated employees, and dis-	•			
2	1	persons Complete Part II of Schedule L	•		22	
	23	Secured mortgages and notes payable to unrelated the	ird parties		23	
	24	Unsecured notes and loans payable to unrelated third	parties		24	
	25	Other liabilities Complete Part X of Schedule D		3,342	25_	186
	26	Total liabilities. Add lines 17 through 25		4,127	26	1,513
es.		Organizations that follow SFAS 117, check here ▶	X and			
Š	ļ	complete lines 27 through 29, and lines 33 and 34.				
ä	27	Unrestricted net assets		14,033	27	<u>31,653</u>
m	28	Temporarily restricted net assets			28	
Б	29	Permanently restricted net assets			29	
교	ļ	Organizations that do not follow SFAS 117, check h	ere 🕨 🗌			
5	ĺ	and complete lines 30 through 34.			1 1	
ţ	30	Capital stock or trust principal, or current funds		ļ	30	
Se	31	Paid-in or capital surplus, or land, building, or equipme	ent fund	ļ	31	
As	32	Retained earnings, endowment, accumulated income,	or other funds		32	
Net Assets or Fund Bafances	33	Total net assets or fund balances		14,033		31,653
Z	34_	Total liabilities and net assets/fund balances		<u>18,16</u> 0	34	_33,166

Form **990** (2009)

om	990 (2009) INSTITUTE OF LUTHERAN THEOLOGY 26-1251815		Pag	ge 12
	rt Xt Financial Statements and Reporting		····	
			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
	Were the organization's financial statements audited by an independent accountant?	2b		X
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		
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both		ļ	
	Separate basis Consolidated basis Both consolidated and separate basis			
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	ļ	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	recovered avidet as avides, avalons why in Schodulo O and describe any stans taken to undergo such avides	3b		1

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

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. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

INSTITUTE OF LUTHERAN THEOLOGY

Employer identification number 26–1251815

Pa	ırt İ	Reaso	n for Public Charity S	Status (All organizations	must c	omplete	this p	art.) S	ee ins	structi	ons		
he (orgai	nization is not a	private foundation because	it is (For lines 1 through 11, ch	heck only	one box)						
1	$\overline{\Box}$	A church, con-	vention of churches, or asso	ciation of churches described in	section	170(b)(1)	(A)(i).						
2	П	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)											
3	Н	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4	Ħ	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,											
-	ш	city, and state											
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in												
•	section 170(b)(1)(A)(iv). (Complete Part II)												
6													
7	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												
•	Ш	•	ection 170(b)(1)(A)(vi). (Co		3					•			
8	\Box			70(b)(1)(A)(vi). (Complete Part l	II)								
9	X			more than 33 1/3 % of its supp		contribution	ons, me	mbershi	p fees,	and gro	ss		
•				pt functions—subject to certain									
				d unrelated business taxable in									
				, 1975 See section 509(a)(2).									
10			-	xclusively to test for public safe									
11	H			·	-			to carry	out the				
	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section												
	509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h												
	a Type I b Type II c Type III—Functionally integrated d Type III—Other												
0	De the date the hour Locate that the exposuration is not controlled directly or indirectly by one or more disquisited												
	persons other than foundation managers and other than one or more publicly supported organizations described in section												
			ection 509(a)(2)										
f		If the organiza	ation received a written detei	rmination from the IRS that it is	a Type I,	Type II, o	or Type I	li suppo	rting				_
			check this box										
g		Since August	17, 2006, has the organizat	ion accepted any gift or contribi	ution from	any of th	e						
		following per											т—
				ntrols, either alone or together v	with perso	ns descr	bed in (1)				Yes	No
		and (III) b	pelow, the governing body of	the supported organization?							11g(i)		+
		. ,	member of a person describ	* *							11g(ii		+
		(iii) A 35% c	ontrolled entity of a person d	lescribed in (i) or (ii) above?							11g(ıi	<u>i)l</u>	<u> </u>
<u>h</u>		Provide the f	ollowing information about the	ne supported organization(s)	T								
(1)		e of supported	(ii) EIN	(iii) Type of organization (described on lines 1–9		rganization sted in your		ou notify ization in	(vi) I organizat		(vii) An suc	nount o port	T
	Οιξ	ganization		above or IRC section	1	document?	col (i)	of your	(i) organı	zed in the		,	
				(see instructions))				ort?	-	3?			
			-	 .	Yes	No	Yes	No	Yes	No			
				 -	1	<u> </u>			-				
		- :											
								<u> </u>					
					-				<u> </u>		<u>. </u>		
]					
	-				1						-		
Tot	al					<u> </u>	1						

33 1/3 % support test-2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this

box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test-2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Sect	tion A. Public Support						
Cal	endar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")				179,212	147,365	326,577
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose					27,960	27,960
3	Gross receipts from activities that are not an unrelated trade or business under section 513	······					
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5				179,212	175,325	354,537
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
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			ŀ	1		
	amount on line 13 for the year						
C	Add lines 7a and 7b	,			-		
8	Public support (Subtract line 7c from line 6)						354,537
	tion B. Total Support		1	T	1 (1) 2000	4-1-0000	(6 T-4-1
	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total 354,537
9	Amounts from line 6				179,212	175,325	354,537
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b				<u> </u>		
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					0	
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)		<u> </u>	1	179,212	175,325	354,537
14	First five years. If the Form 990 is for the organization, check this box and stop her	-	st, second, third, fo	ourth, or fifth tax ye	ear as a section 501	(c)(3)	▶ [X
Sec	tion C. Computation of Public S	upport Perce	ntage	. <u> </u>	<u></u>		
15	Public support percentage for 2009 (line 8	3, column (f) dıvıd	ed by line 13, colu	mn (f))		15	%
16	Public support percentage from 2008 Sch					16	%_
Sec	ction D. Computation of Investme	ent Income Po	ercentage				
17	Investment income percentage for 2009 (3, column (f))		17	%
18	Investment income percentage from 2008	Schedule A, Pai	t III, line 17			18	%
19a	33 1/3 % support tests—2009. If the orga						. –
	17 is not more than 33 1/3 %, check this						▶ _
b	• • • • • • • • • • • • • • • • • • • •						,
	line 18 is not more than 33 1/3 %, check						<u> </u>
20	Private foundation. If the organization di	d not check a box	on line 14, 19a, o	r 19b, check this b	ox and see instructi	ons	<u></u> ▶

Schedule A (Form 990 or 990-EZ) 2009 INSTITUTE OF LUTHERAN THEOLOGY 26-1251815

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

SCHEDULĖ D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

➤ Attach to Form 990. ➤ See separate instructions.

2009
Open to Public Inspection

Employer identification number Name of the organization INSTITUTE OF LUTHERAN THEOLOGY 26-1251815 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Part II Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a 2b b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section Yes No 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Schedule D (Form 990) 2009

c Leasehold improvements

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

d Equipment

o Other

	nvestments-Other Securities. See Form 9			
	(a) Description of security or category	(b) Book value	(c) Method of valuation	
	(including name of security)		Cost or end-of-year market	/alue
ancial derivativ	res			
sely-held equit	y interests			
er				
		-		
		_		
		-		
	<i> </i>	-		
) and a set Ferra 200 Port V and (P) line 42.)			
tal. (Column (b) must equal Form 990, Part X, col (B) line 12) nvestments—Program Related. See Form 9	000 Part Y line 13		····
Part VIII I	(a) Description of investment type	(b) Book value	(c) Method of valuation	
	(a) Description of investment type	(b) Book Value	Cost or end-of-year market	
		 		
		 -		. ,-
•				
	<u> </u>			
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otal. (Column (t	o) must equal Form 990, Part X, col (B) line 13)	>		
Part IX C	Other Assets. See Form 990, Part X, line 15			
	(a) Description		(t) Book value
				Jr., Jr
		1		
	November 201 Form 200 Fort V. cel. (7) line 15)			
	b) must equal Form 990, Part X, col (B) line 15)	25	>	
	Other Liabilities. See Form 990, Part X, line		>	
Part X (Other Liabilities. See Form 990, Part X, line (a) Description of liability	e) 25.	>	
Part X (Other Liabilities. See Form 990, Part X, line (a) Description of liability axes	(b) Amount	•	
Part X (Other Liabilities. See Form 990, Part X, line (a) Description of liability		>	
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organization's liability for uncertain tax positions under FIN 48

	dule D (Form 990) 2009 INSTITUTE OF LUTHERAN THEOLOGY		26-125181		Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	Audi	ted Financial Statem		· · · · · · · · · · · · · · · · · · ·
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities			5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lines 4 through 8			9	
	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			10	
Pa	nt XII Reconciliation of Revenue per Audited Financial Statemer	nts V	ith Revenue per Re	turn	
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 on investments	2a		1 1	
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	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:	ſ			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b		1	
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	
Pa	Reconciliation of Expenses per Audited Financial Statement	ents	With Expenses per F	Retur	'n
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a		[
b	Prior year adjustments	2b			
С	Other losses	2c		1	
d	Other (Describe in Part XIV)	2d]	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	ſ			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b		1	
	Add lines 4a and 4b			4c	}
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	
	art XIV Supplemental Information				·
	plets this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lin	nes 1a	and 4. Part IV. lines 1b		
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, line				
	part to provide any additional information				
	The provide any additional minimation				
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Schedule D (F		(Fo	Form 990) 200				pplemental Information (continued)								26-1251815						Page 5					Page 5										
P	art	XI	V	Su	pp	lem	ent	tal	Info	orm	atio	on	(co	ntin	ue	<u>d)</u>													_							
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SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public inspection

Name of the organization

INSTITUTE OF LUTHERAN THEOLOGY

Employer identification number 26-1251815

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES

TO EDUCATE AND PREPARE ORDAINED AND LAY LUTHERAN LEADERS, FOLLOWERS OF

JESUS CHRIST, FOR EVANGELICAL VOCATIONS SO THAT: THEY MAY WALK IN THE WAY

OF JESUS CHRIST, KNOW THE TRUTH WHICH IS CHRIST, AND WITNESS THEIR

RESURRECTED LIFE IN CHRIST FOR ALL TO SEE.

FORM 990, PART VI, LINE 11A - ORGANIZATION'S PROCESS TO REVIEW FORM 990 NO REVIEW WAS OR WILL BE CONDUCTED.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION NO DOCUMENTS AVAILABLE TO THE PUBLIC

Form **8868** (Rev April 2009)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

Form 8868 (Rev 4-2009)

Internal Revenu	e Service			
If you are	filing for an Automatic 3-Month Extension, complete only Part I and check this box			▶ X
If you are	filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this for	m)		
Do not comp	ete Part II unless you have already been granted an automatic 3-month extension on a previously filed	orm 8868	3.	
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed	l).		
A corporation	required to file Form 990-T and requesting an automatic 6-month extension—check this box and comple	te		
Part I only	required to the visiting of and requesting an automate of month extension.	.0		ightharpoons
•	profices (uncluding 4420 C files), northernbine, DEMICE, and truste must use Form 7004 to require the pro-	donaion o	•	, L
	prations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an ex ome tax returns.	(tension o	I	
		£ 4 4 a £	11-	
	ing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension our Inns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form		iie	
	if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 88			
_	composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2			
	re details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Chanties & Non		1 01111	
Type or	Name of Exempt Organization		er identification num	her
print	Name of Exempt Organization	Linploye		
File by the	INSTITUTE OF LUTHERAN THEOLOGY	26-1	251815	
due date for	Number, street, and room or suite no. If a P O box, see instructions			
filing your return See	910 4TH ST			
instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions			
	BROOKINGS SD 57006			
	f return to be filed (file a separate application for each return).			
Y Form 9	Form 990-T (corporation)		Form 4720	
Form 9	90-BL Form 990-T (sec 401(a) or 408(a) trust)		Form 5227	
Form 9	· · · · · · · · · · · · · · · · · · ·		Form 6069	
Form 9	90-PF		Form 8870	
Telephon If the org If this is f for the whole a list with the until	anization does not have an office or place of business in the United States, check this box or a Group Return, enter the organization's four digit Group Exemption Number (GEN)	If this is attach		▶ □
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2 If this t	ex year is for less than 12 months, check reason: Initial return Final return Change	in accoun	ting period	
	pplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,			
	y nonrefundable credits. See instructions.	3a	\$	
	pplication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax			
	nts made. Include any prior year overpayment allowed as a credit.	3b	<u> </u>	
	e Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,			
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment) See instructions	3c	e	
for payment	ou are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 88 instructions.	18-EU		

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.