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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2010

Open to Public
InspectionDepartment of the Treasury
Internal Revenue ServiceUnder 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 2010 calendar year, or tax year beginning , 2010, and ending , 20

B Check if applicable		C Name of organization DIAKON LUTHERAN SOCIAL MINISTRIES			D Employer identification number 23-1857015	
Address change		Doing Business As			E Telephone number (610) 682-1262	
Name change		Number and street (or P O box if mail is not delivered to street address)			Room/suite 300	G Gross receipts \$ 314,663,352.
Initial return		798 HAUSMAN ROAD				H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Terminated		City or town, state or country, and ZIP + 4				H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
Amended return		ALLENTEWN, PA 18104				If "No," attach a list (see instructions)
Application pending		F Name and address of principal officer MARK T. PILE				H(c) Group exemption number ► 9386
		798 HAUSMAN ROAD, STE 300 ALLENTEWN, PA 18104				
I Tax-exempt status		X 501(c)(3)	501(c)()	◀ (Insert no.)	4947(a)(1) or	527
J Website:		► WWW.DIAKON.ORG				
K Form of organization		X Corporation	Trust	Association	Other ►	L Year of formation 1868 M State of legal domicile PA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities. THE ORGANIZATION IS A LEADING PROVIDER OF SENIOR LIVING SERVICES AND SOCIAL SERVICES, INCLUDING ADOPTION, FOSTER CARE, COUNSELING AND YOUTH SERVICES IN PENNSYLVANIA, MARYLAND, AND DELAWARE.		
	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets	3	13.
	3 Number of voting members of the governing body (Part VI, line 1a)	4	13.
	4 Number of independent voting members of the governing body (Part VI, line 1b)	5	2,869.
	5 Total number of individuals employed in calendar year 2010 (Part VI, line 1c)	6	4,800.
	6 Total number of volunteers (estimate if necessary)	7a	-147,231.
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7b	-147,231.
b Net unrelated business taxable income from Form 990-T, line 34			
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	
	9 Program service revenue (Part VIII, line 2g)	Current Year	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,286,903.	5,755,486.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	194,849,819.	204,307,295.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,720,507.	14,397,538.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,839,710.	1,259,084.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	209,696,939.	225,719,403.
Expenses	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	180,544.	365,850.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25)	89,432,816.	88,707,048.
	17 Other expenses (Part IX, column (A), lines 11a-11b, 11f-24f)	33,030.	79,517.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	117,607,533.	132,173,082.
	19 Revenue less expenses Subtract line 18 from line 12	207,253,923.	221,325,497.
	20 Total assets (Part X, line 16)	2,443,016.	4,393,906.
Net Assets or Fund Balances	21 Total liabilities (Part X, line 26)	Beginning of Current Year	End of Year
	22 Net assets or fund balances Subtract line 21 from line 20	425,059,752.	444,423,691.
		337,344,220.	361,303,576.
	87,715,532.	83,120,115.	

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	► <i>Richard M. Barger</i> Signature of officer	PSC-CSS-DEPT/J-109 JAN 31 2013		
	► Executive VP & CFO <i>Richard Barger</i> Type or print name and title			

Paid Preparer Use Only	Print/Type preparer's name Scott Sherman	Preparer's signature <i>Scott Sherman</i>	Date 10/19/11	Check if self-employed <input type="checkbox"/>	PTIN P00451522
	Firm's name ► KPMG LLP			Firm's EIN ► 13-5565207	
	Firm's address ► 1676 INTERNATIONAL DRIVE MCLEAN, VA 22102			Phone no 703-286-8000	

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

For Paperwork Reduction Act Notice, see the separate instructions.

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