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CISVHYPTN4

Form **990**

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.

OMB No 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning , and ending

B Check if applicable: [ ] Address change [X] Name change [ ] Initial return [ ] Terminated [ ] Amended return [ ] Application pending

C Name of organization: LUTHERAN HOMES SOCIETY, INC.

Doing Business As

Number and street (or P O. box if mail is not delivered to street address): 2021 NORTH MCCORD ROAD — Room/suite

City or town, state or country, and ZIP + 4: TOLEDO OH 43615

D Employer identification number: 31-1565719

E Telephone number: 419-693-1520

G Gross receipts $ 47,364,424

F Name and address of principal officer:
DAVID ROBERTS
2021 NORTH MCCORD ROAD
TOLEDO OH 43605

H(a) Is this a group return for affiliates? [ ] Yes [X] No

H(b) Are all affiliates included? [ ] Yes [ ] No
If "No," attach a list (see instructions)

I Tax-exempt status: [X] 501(c)(3) [ ] 501(c) ( ) ◆ (insert no) [ ] 4947(a)(1) or [ ] 527

J Website: ◆ LHSOH.ORG

H(c) Group exemption number ◆

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other ◆

L Year of formation 1997

M State of legal domicile OH

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
See Schedule O

2 Check this box ◆ [ ] 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	13
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	13
5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	1163
6	Total number of volunteers (estimate if necessary)	6	572
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	46,327	807,798
	9	Program service revenue (Part VIII, line 2g)	3,604,374	45,860,813
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	12,718	70,242
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	39,178	379,664
	12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,702,597	47,118,517
Expenses	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
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	2,977,261	29,375,113
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ◆ 307,587		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	730,482	18,658,117
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	3,707,743	48,033,230
	19	Revenue less expenses. Subtract line 18 from line 12	-5,146	-914,713
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	4,282,914	59,958,296
	21	Total liabilities (Part X, line 26)	896,577	42,194,402
	22	Net assets or fund balances. Subtract line 21 from line 20	3,386,337	17,763,894

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Rec'd 11-19-12

SCANNED JAN 11 2013

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: Mary M Shurts — Date: 11/15/12

MARY SHURTS TREASURER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN

Firm's name: This tax return prepared by a non-paid preparer. — Firm's EIN

Firm's address — Phone no

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

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

Form 990 (2011)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III [X]

1 Briefly describe the organization's mission:

See Schedule O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [X] Yes [ ] 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? [ ] Yes [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 expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 32,230,814 including grants of $) (Revenue $ 37,932,687)

LONG-TERM CARE PROGRAM: PROVIDES RESIDENTIAL CARE AND SUPPORTIVE SERVICES FOR THE ELDERLY. FOR 2011, 1,424 INDIVIDUALS WERE SERVED FOR A TOTAL OF 218,145 RESIDENT CARE DAYS. SERVICES PROVIDED THROUGH THE SKILLED NURSING CARE CENTERS INCLUDE 24-HOUR SKILLED NURSING CARE; INTENSIVE PHYSICAL, OCCUPATIONAL AND SPEECH THERAPIES; REHABILITATION AND RESTORATIVE PROGRAMMING; SPECIALIZED DIETARY PROGRAMMING; DIABETIC MANAGEMENT; DEMENTIA CARE AND PSYCHOLOGICAL SERVICES; PASTORAL CARE; PLANNED ACTIVITIES; LAUNDRY AND HOUSEKEEPING; HOSPICE AND RESPITE CARE; IN-HOUSE PODIATRY; VISION AND DENTAL SERVICES; PHARMACY SERVICES; SOCIAL SERVICES; AND RESIDENT ADVOCACY. ASSISTED LIVING RESIDENTS MAY CHOOSE FROM A WIDE RANGE OF SERVICES AND AMENITIES DEPENDING UPON THEIR SPECIFIC NEEDS. (SEE SCHEDULE O)

4b (Code:) (Expenses $ 5,801,612 including grants of $) (Revenue $ 6,542,224)

FAMILY & YOUTH SERVICES PROGRAM: PROVIDES RESIDENTIAL CARE AND SUPPORTIVE SERVICES FOR CHILDREN, YOUTH, AND THEIR FAMILIES. FOR 2011, 107 INDIVIDUALS WERE SERVED FOR A TOTAL OF 13,762 RESIDENT CARE DAYS. FAMILY AND YOUTH SERVICES PROVIDES RESIDENTIAL AND RELATED CARE AND TREATMENT TO CHILDREN, YOUTH AND ADULTS WHOSE CIRCUMSTANCES AND NEEDS NECESSITATE NURTURE AND SPECIAL SERVICES OUTSIDE THEIR HOMES, PROVIDING COMPREHENSIVE SERVICES WHICH EMPOWER YOUNG PEOPLE AND THEIR FAMILIES TO MEET THEIR OWN NEEDS AND TO CARE FOR OTHERS, PROVIDING PREVENTION AND INTERVENTION SERVICE TO CHILDREN, FAMILIES, AND YOUTH WHOSE CIRCUMSTANCES MAY INDICATE THEY ARE AT A RISK FOR OUT OF HOME PLACEMENT FOR SERVICES, AND PROVIDING AFTERCARE SUPPORT AND SERVICES TO CHILDREN AND FAMILIES WHO HAVE (SEE SCHEDULE O)

4c (Code:) (Expenses $ 1,338,475 including grants of $) (Revenue $ 1,385,902)

INDEPENDENT LIVING PROGRAM: PROVIDES HOUSING FOR THE ELDERLY. FOR 2011, 819 INDIVIDUALS WERE PROVIDED HOUSING FOR A TOTAL OF 239,990 DAYS. HOUSING SERVICES HAS DEVELOPED COMMUNITIES THAT OFFER AFFORDABLE HOUSING TO PEOPLE WHO ARE AGE 62 AND OLDER. EACH COMMUNITY PROVIDES OPPORTUNITIES FOR RECREATIONAL AND RELIGIOUS PROGRAMS, SOCIAL EVENTS, OUTINGS, AND DAILY PEER CONTACT. LHS HOUSING IS COMMITTED TO HELPING RESIDENTS MAINTAIN THEIR INDEPENDENCE AND, AT EACH OF THE COMMUNITIES, A SERVICE COORDINATOR IS ON SITE TO ASSIST RESIDENTS IN PROCURING MEALS, HOME HEALTH CARE, HOUSEKEEPING, ETC., ALL WHICH HELP IN MAINTAINING ONE'S INDEPENDENCE. THESE SERVICES INCLUDE ASSISTING IN PROVIDING FOR ELDERLY AND/OR FAMILIES AND PERSONS ON A NONPROFIT BASIS, RENTAL HOUSING AND (SEE SCHEDULE O)

4d Other program services. (Describe in Schedule O.)

(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses ◆ 39,370,901

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 (see instructions)?	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		X
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		X
9	Did the organization report an amount in Part X, line 21; 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		X
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, VII, VIII, IX, or X as applicable.			
a	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
c	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		X
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	
e	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, XII, and XIII	12a		X
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, XII, and XIII 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
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, business, 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		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, 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 assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	*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 (see instructions)	17		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
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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		X
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 "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	X	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
c	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		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
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
b	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		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or 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 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	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):			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		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
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	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 conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		X
33	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, Parts II, III, IV, and V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b	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	X	
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	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	133		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	*Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?*	1c		X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	1163		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	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 authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X
b	If "Yes," enter the name of the foreign country: ◆ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.	4b			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?	6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or *gifts were not tax deductible?*	6b			
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods 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 required to file Form 8282?	7c			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	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.**				
a	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.				
a	*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			
11	**Section 501(c)(12) organizations.** Enter:				
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 amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	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			
c	Enter the amount of reserves on hand	13c			
14a	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 O	14b			

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 to any question in this Part VI ☒

Section 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	13		
	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	13		
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			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			X
6	Did the organization have members or stockholders?	6			X
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?	7a		X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X	
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	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9			X

Section 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	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	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
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	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did 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?			
a	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		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation 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		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ◆ OH

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☒ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ◆ MARY M. SHURTS 2021 N. MCCORD TOLEDO OH 43615 419-861-4905

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

Check if Schedule O contains a response to any question 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.

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DANIEL KUNOS VICE CHAIR	0.00	X		X				0	0	0
(2) JANET DORR SECRETARY	0.00	X		X				0	0	0
(3) REV. DOUGLAS MEILANDER DIRECTOR	0.00	X						0	0	0
(4) DANIEL PERRY DIRECTOR	0.00	X						0	0	0
(5) LYNN OLMAN CHAIR	0.00	X		X				0	0	0
(6) ROBIN BURKETT DIRECTOR	0.00	X						0	0	0
(7) JENNIFER FEHNRICH DIRECTOR	0.00	X						0	0	0
(8) SCOTT HOFFMAN DIRECTOR	0.00	X						0	0	0
(9) NATALIE JACKSON DIRECTOR	0.00	X						0	0	0
(10) LORI JOHNSTON DIRECTOR	0.00	X						0	0	0
(11) KATHY MARTIN DIRECTOR	0.00	X						0	0	0
(12) EDWARD MCNEAL DIRECTOR	0.00	X						0	0	0
(13) PHILIP MEUSER DIRECTOR	0.00	X						0	0	0
(14) DAVID I ROBERTS PRESIDENT & CEO	- LHS, INC. 40.00				X			220,761	0	76,238

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) MARY SHURTS - LHS, INC. TREASURER/CFO	40.00				X			175,396	0	36,715
(16) DONNA KONST VP FOR L/T SERVICES	40.00				X			158,090	0	22,915
(17) LORINDA SCHALK VP-YOUTH & HOUSING	40.00					X		135,493	0	13,149
(18) JOHN HENRY DIR. OF FACILITIES	40.00					X		113,080	0	20,758
(19) STEVE DUMKE SR. EXECUTIVE DIR.	40.00					X		103,796	0	20,528
(20) KENNETH MAUER - LAW OFFICE FORMER CHAIR	0.00						X	154,734	6,762	0
(21)										
(22)										
(23)										
(24)										
(25)										
1b Sub-total							◆	1,061,350	6,762	190,303
c Total from continuation sheets to Part VII, Section A							◆			
d Total (add lines 1b and 1c)							◆	1,061,350	6,762	190,303

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ◆ 7

		Yes	No
3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	X	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If "Yes," complete Schedule J for such individual	4	X	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
UNITED REHABILITATION 3949 SUNFOREST COURT, SUITE 101 TOLEDO OH 43623	THERAPY SERVICE	238,080
TOM COOK CO. LTD. 551 CORBETT RD., SUITE 6 GROVEPORT OH 43125	ROOF REPAIRS	223,120
GENESIS REHABILITATION SERVICES PO BOX 7247-6524 PHILADELPHIA PA 19170	THERAPY SERVICE	190,859
ST. LUKE'S HOSPITAL 5901 MONCLOVA ROAD MAUMEE OH 43537	MEDICAL SERVICE	184,131
MARSHALL & MELHORN LLC FOUR SEAGATE, EIGHTH FLOOR TOLEDO OH 43604	LEGAL SERVICES	154,356

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ◆ 5

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d	801,438			
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	6,360			
	g Noncash contributions included in lines 1a-1f: $					
	h Total. Add lines 1a–1f	◆	807,798			
Program Service Revenue		Busn. Code				
	2a SERV.FEES-MEDICARE & MEDICAID		18,816,185	18,816,185		
	b SERVICE FEES-PRIVATE PAY		14,110,108	14,110,108		
	c CHILD CARE PROGRAMS		5,187,257	5,187,257		
	d SERVICE FEES-MANAGED CARE		4,062,063	4,062,063		
	e SERVICE FEES-OTHER PAYORS		1,079,547	1,079,547		
	f All other program service revenue		2,605,653	2,605,653		
	g Total. Add lines 2a–2f	◆	45,860,813			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	◆	127,740			127,740
	4 Income from investment of tax-exempt bond proceeds	◆				
	5 Royalties	◆				
		(i) Real	(ii) Personal			
	6a Gross rents	271,521				
	b Less rental exps	183,001				
	c Rental inc or (loss)	88,520				
	d Net rental income or (loss)	◆	88,520	88,520		
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory	3,190	2,218			
	b Less cost or other basis & sales exps.		62,906			
	c Gain or (loss)	3,190	-60,688			
	d Net gain or (loss)	◆	-57,498	-57,498		
	8a Gross income from fundraising events (not including $ ... of contributions reported on line 1c). See Part IV, line 18 a					
	b Less. direct expenses b					
	c Net income or (loss) from fundraising events	◆				
	9a Gross income from gaming activities See Part IV, line 19 a					
	b Less: direct expenses b					
	c Net income or (loss) from gaming activities	◆				
	10a Gross sales of inventory, less returns and allowances a					
	b Less: cost of goods sold b					
	c Net income or (loss) from sales of inventory	◆				
	Miscellaneous Revenue	Busn. Code				
	11a MISCELLANEOUS INCOME		291,144	291,144		
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a–11d	◆	291,144			
	12 Total revenue. See instructions.	◆	47,118,517	46,182,979	0	127,740

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).

Check if Schedule O contains a response to any question in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 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				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	690,115		690,115	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	22,707,904	19,280,708	3,231,181	196,015
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	636,392	513,639	116,952	5,801
9 Other employee benefits	3,674,672	3,185,987	464,745	23,940
10 Payroll taxes	1,666,030	1,395,439	256,571	14,020
11 Fees for services (non-employees)				
a Management				
b Legal	228,830		228,758	72
c Accounting	106,072		106,072	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	1,378,938	1,220,952	155,676	2,310
12 Advertising and promotion	156,331		137,837	18,494
13 Office expenses	218,150	29,648	177,194	11,308
14 Information technology	441,484	10,459	418,753	12,272
15 Royalties				
16 Occupancy	1,703,196	1,478,133	222,452	2,611
17 Travel	155,439	107,863	43,243	4,333
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	80,128	25,653	47,747	6,728
20 Interest	2,144,322	1,777,494	366,828	
21 Payments to affiliates	138,307		138,307	
22 Depreciation, depletion, and amortization	2,431,645	2,030,861	400,784	
23 Insurance	558,999	489,644	68,506	849
24 Other expenses. Itemize expenses not covered 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)				
a DUES, LICENSES & SUBSC.	1,801,616	1,668,827	130,063	2,726
b RESIDENT CARE SUPPLIES	1,650,570	1,650,570		
c DIETARY FOOD EXPENSES	1,382,235	1,378,208	4,027	
d ALLOCATED SALARIES/WAGES	1,015,306	836,112	179,194	
e All other expenses	3,066,549	2,290,704	769,737	6,108
25 Total functional expenses. Add lines 1 through 24e	48,033,230	39,370,901	8,354,742	307,587
26 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 (2011) LUTHERAN HOMES SOCIETY, INC. 31-1565719

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest bearing		355,129	1	2,951,893
	2	Savings and temporary cash investments			2	7,872,455
	3	Pledges and grants receivable, net			3	8,088
	4	Accounts receivable, net		998,202	4	6,937,471
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)			6	
	7	Notes and loans receivable, net			7	1,981,491
	8	Inventories for sale or use			8	28,169
	9	Prepaid expenses and deferred charges		9,204	9	536,809
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 65,598,358			
	b	Less: accumulated depreciation	10b 35,898,429	1,111,097	10c	29,699,929
	11	Investments—publicly traded securities			11	1,789,659
	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		1,809,282	15	8,152,332
	16	Total assets. Add lines 1 through 15 (must equal line 34)		4,282,914	16	59,958,296
Liabilities	17	Accounts payable and accrued expenses		557,827	17	4,907,967
	18	Grants payable			18	
	19	Deferred revenue		27,439	19	9,399
	20	Tax-exempt bond liabilities			20	31,770,000
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties		37,850	23	3,505,886
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		273,461	25	2,001,150
	26	Total liabilities. Add lines 17 through 25		896,577	26	42,194,402
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ◆[X] and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		3,067,756	27	17,264,082
	28	Temporarily restricted net assets		47,332	28	243,351
	29	Permanently restricted net assets		271,249	29	256,461
		Organizations that do not follow SFAS 117, check here ◆[ ] and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		3,386,337	33	17,763,894
	34	Total liabilities and net assets/fund balances		4,282,914	34	59,958,296

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI [X]

1	Total revenue (must equal Part VIII, column (A), line 12)	1	47,118,517
2	Total expenses (must equal Part IX, column (A), line 25)	2	48,033,230
3	Revenue less expenses. Subtract line 2 from line 1	3	-914,713
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,386,337
5	Other changes in net assets or fund balances (explain in Schedule O)	5	15,292,270
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	17,763,894

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII [ ]

			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
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
c	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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	X	
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 separate basis, consolidated basis, or both: [ ] Separate basis [X] 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		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

2011

Open to Public Inspection

Name of the organization: LUTHERAN HOMES SOCIETY, INC.

Employer identification number: 31-1565719

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1 ☐ 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.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ 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.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ 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.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☒ 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.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ 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

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
11g(i) (i) *A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below,* the governing body of the supported organization?		
11g(ii) (ii) A family member of a person described in (i) above?		
11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above?		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document? Yes	(iv) No	(v) Did you notify the organization in col. (i) of your support? Yes	(v) No	(vi) Is the organization in col (i) organized in the U S ? Yes	(vi) No	(vii) Amount of support
(A)									
(B)									
(C)									
(D)									
(E)									
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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ◆	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ◆	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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 IV.)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) 12

13 ***First five years.*** *If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and* **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 14 %

15 Public support percentage from 2010 Schedule A, Part II, line 14 15 %

16a **33 1/3% support test—2011.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support test—2010.** 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—2011.** 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 ▶ ☐

b **10%-facts-and-circumstances test—2010.** 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 ▶ ☐

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

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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ◆	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants ")	68,059	16,652	139,652	46,327	807,798	1,078,488
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	6,348,602	7,152,505	6,873,528	3,604,374	45,860,813	69,839,822
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	6,416,661	7,169,157	7,013,180	3,650,701	46,668,611	70,918,310
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 amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6.)						70,918,310

Section B. Total Support

Calendar year (or fiscal year beginning in) ◆	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	6,416,661	7,169,157	7,013,180	3,650,701	46,668,611	70,918,310
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	20,572	42,645	25,693	12,938	399,261	501,109
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	20,572	42,645	25,693	12,938	399,261	501,109
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)	63,772	94,277	67,845	39,178	291,144	556,216
13 **Total support.** (Add lines 9, 10c, 11, and 12.)	6,501,005	7,306,079	7,106,718	3,702,817	47,359,016	71,975,635

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	98.53%
16	Public support percentage from 2010 Schedule A, Part III, line 15	16	98.69%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2011** (line 10c, column (f) divided by line 13, column (f))	17	1%
18	Investment income percentage from **2010** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests—2011.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support tests—2010.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Part III, Line 12 - Other Income Detail

MISCELLANEOUS INCOME	$ 556,216

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

◆ Complete if the organization is described below. ◆ Attach to Form 990 or Form 990-EZ.
◆ See separate instructions.

OMB No. 1545-0047

2011

Open to Public Inspection

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations· Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations· Complete Part III.

Name of organization	Employer identification number
LUTHERAN HOMES SOCIETY, INC.	31-1565719

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
2 Political expenditures ◆ $
3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ◆ $
2 Enter the amount of any excise tax incurred by organization managers under section 4955 ◆ $
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
4a Was a correction made? ☐ Yes ☐ No
b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ◆ $
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ◆ $
3 Total exempt function expenditures. Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ◆ $
4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ◆ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ◆ ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is
Not over $500,000	20% of the amount on line 1e
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000.
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000.
Over $17,000,000	$1,000,000

g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a. If zero or less, enter -0-		
i Subtract line 1f from line 1c. If zero or less, enter -0-		

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B **Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a) Yes	(a) No	(b) Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?		X	
d *Mailings to members, legislators, or the public?*	X		16,100
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		35,187
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	
j Total. Add lines 1c through 1i			51,287
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

		Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1		
2 Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		

Part III-B **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) if Part III-A, line 3, is answered "Yes."**

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (**do not include amounts of political expenses for which the section 527(f) tax was paid**).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV **Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A; and Part II-B, line 1 Also, complete this part for any additional information.

Schedule C, Part II-B, Line 1

Fair reimbursements for Medicaid/Medicare resident care and related long-term services issues.

-Letters were sent to our federal legislators: Senators Sherrod Brown and George Voinovich and U. S. Representatives Jim Jordan, Marcy Kaptur and Bob Latta regarding Medicaid issues, specifically challenging our

Part IV Supplemental Information (continued)

legislators to make a decision on the role of our government to provide for needy elderly.

-In Washington, we were able to meet with legislators and/or their aides, including the offices of Senator Sherrod Brown, Senator George Voinovich, Congressman Bob Latta, Congressman Jim Jordan and Congresswoman Marcy Kaptur. We addressed the issue of Medicaid and the effect that cutting benefits will have on long-term care ministries and the impact these issues were having on their constituents.

-We were able to speak with our state legislators (Sen. Mark Wagoner and Representatives Barbara Sears and Matt Szollosi) at the Annual Chamber Legislative Breakfast, helping them to understand the issues and decisions they make as they affect the elderly throughout Ohio and specifically those we serve.

-We lobbied our federal legislators (Senators Brown, Voinovich, and Congressional Representatives Kaptur, Latta and Jordan) directly and through their staff members with regard to funding as it pertains to Medicaid, Medicare, and Housing.

-We lobbied Senators Brown and Voinovich and Congressional Representatives Jordan, Kaptur and Latta with regard to the National Housing Trust Fund. Lutheran Homes Society had the opportunity to testify on behalf of this Fund at the House Financial Services Committee when it was first introduced in 2007. We continue to support the National Housing Trust Fund because it will provide a new source of much needed funding for affordable housing development. Providing services in peoples homes, such as independent living, saves money because that person is "aging in place." However, they must have the homes to age in place. The National Housing Trust Fund will help to provide for these frail, elderly to live independently.

Part IV Supplemental Information (continued)

Miscellaneous Lobbying Activities

-We met with our federal and state legislators and their staff members to advocate for issues facing our senior population. We proposed a demonstration project that would provide for a "distinct part" enabling the reduction of Medicaid certified beds. We met with Senator Mark Wagoner and Representatives Randy Gardner, Barbara Sears, and Lynn Wachtmann and legislative staff members of Senator Edna Brown and Representatives Teresa Fedor and Matt Szollosi and federal legislators or staff members of Senator Portman and Congressional representatives Jordan, Kaptur and Latta.

-We proposed to HUD recommended changes in their processes and addressed the difficulties facing current HUD partners regarding challenges in maintaining current properties without financial resources because of the way awards are granted.

-We requested assistance from the offices of Congressman Jim Jordan and Senator Sherrod Brown and Congresswoman Marcy Kaptur with regard to our request for an Assisted Living conversion grant for units at Luther Pines in Lima and the denial we received for inaccurate reasons.

-Our cabinet members participated in Leading Age sponsored "call-in" days regarding (1) the HUD 202 program, specifically restoring funding to include new development of Section 202 units and (2) requesting federal Senators and Congressional representatives to vote to extend the exceptions process that gives Medicare beneficiaries coverage for the amount of medically necessary therapy services they need.

SCHEDULE 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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
◆ Attach to Form 990. ◆ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

LUTHERAN HOMES SOCIETY, INC.

Employer identification number

31-1565719

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 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? ☐ Yes ☐ No

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? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e.g., recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

2 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
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ◆

4 Number of states where property subject to conservation easement is located ◆

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ◆

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ◆ $

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 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.

Part III 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 (ASC 958), 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 (ASC 958), 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 ◆ $

2 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 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ◆ $
b Assets included in Form 990, Part X ◆ $

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☐ Public exhibition
- b ☐ Scholarly research
- c ☐ Preservation for future generations
- d ☐ Loan or exchange programs
- e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table.

		Amount
c	Beginning balance	1c
d	Additions during the year	1d
e	Distributions during the year	1e
f	Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ◆ %
- b Permanent endowment ◆ %
- c Temporarily restricted endowment ◆ %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,557,685		1,557,685
b Buildings		50,453,948	27,851,246	22,602,702
c Leasehold improvements		1,772,946	1,188,294	584,652
d Equipment		8,806,254	6,858,889	1,947,365
e Other		3,007,525		3,007,525
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ◆				29,699,929

Part VII Investments—Other Securities. 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 end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ◆		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ◆		

Part IX Other Assets. See Form 990, Part X, line 15.

	(a) Description	(b) Book value
(1)	INTEREST IN LHS FOUNDATION	2,843,217
(2)	OTHER A/R & ADVANCES	2,556,720
(3)	FINANCING FEES	1,303,214
(4)	INTEREST IN LIFE LEASES	873,082
(5)	BENEFICIAL INTEREST IN TRUST	253,313
(6)	CSV LIFE INSURANCE-KEYMAN	160,688
(7)	GOODWILL	113,760
(8)	OTHER	47,438
(9)	DEPOSITS	900
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15) ◆		8,152,332

Part X Other Liabilities. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	DUE TO RELATED PARTY	1,485,547
(3)	OTHER	340,796
(4)	DEPOSITS	174,807
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ◆		2,001,150

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

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	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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.				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV.)	2d			
e	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:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	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 XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

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:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV.)	2d			
e	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:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	

Part XIV Supplemental Information

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Part XIV Supplemental Information (continued)

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

◆ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

◆ Attach to Form 990. ◆ See separate instructions.

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization

LUTHERAN HOMES SOCIETY, INC.

Employer identification number

31-1565719

Part I Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
	☐ First-class or charter travel		
	☐ Travel for companions		
	☐ Tax indemnification and gross-up payments		
	☐ Discretionary spending account		
	☐ Housing allowance or residence for personal use		
	☐ Payments for business use of personal residence		
	☐ Health or social club dues or initiation fees		
	☐ Personal services (e.g., maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2		
3	Indicate which, if any, of the following the filing organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director Explain in Part III.		
	☐ Compensation committee		
	☒ Independent compensation consultant		
	☐ Form 990 of other organizations		
	☐ Written employment contract		
	☒ Compensation survey or study		
	☒ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a	Receive a severance payment or change-of-control payment? 4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b	X	
c	Participate in, or receive payment from, an equity-based compensation arrangement? 4c		X
	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.		
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.		
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a	The organization? 5a		X
b	Any related organization? 5b		X
	If "Yes" to line 5a or 5b, describe in Part III		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a	The organization? 6a		X
b	Any related organization? 6b		X
	If "Yes" to line 6a or 6b, describe in Part III		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? 9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)–(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
DAVID I ROBERTS - LHS, INC.	(i)	220,002	0	759	68,921	7,317	296,999	0
1	(ii)	0	0	0	0	0	0	0
MARY SHURTS - LHS, INC.	(i)	175,000	0	396	29,600	7,115	212,111	0
2	(ii)	0	0	0	0	0	0	0
DONNA KONST	(i)	158,000	0	90	6,320	16,595	181,005	0
3	(ii)	0	0	0	0	0	0	0
KENNETH MAUER - LAW OFFICE	(i)	0	0	154,734	0	0	154,734	0
4	(ii)	0	0	6,762	0	0	6,762	0
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Part I, Line 4 - Severance, Nonqualified, and Equity-Based Payments

	Severance	Nonqualified	Equity-based
DAVID I ROBERTS - LHS, INC.	0	60,121	0
MARY SHURTS - LHS, INC.	0	22,600	0

SCHEDULE K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

◆ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

◆ Attach to Form 990. ◆ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

LUTHERAN HOMES SOCIETY, INC.

Employer identification number

31-1565719

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
							Yes	No	Yes	No	Yes	No
A	COUNTY OF LUCAS, OHIO	34-6400806	549308BS2	12/09/10	31,945,000	SEE PART VI		X		X		X
B												
C												
D												

Part II Proceeds

	A	B	C	D
1 Amount of bonds retired	175,000			
2 Amount of bonds legally defeased				
3 Total proceeds of issue	31,945,000			
4 Gross proceeds in reserve funds	2,494,041			
5 Capitalized interest from proceeds				
6 Proceeds in refunding escrows				
7 Issuance costs from proceeds	1,146,933			
8 Credit enhancement from proceeds	171,979			
9 Working capital expenditures from proceeds				
10 Capital expenditures from proceeds	2,024,530			
11 Other spent proceeds	23,271,333			
12 Other unspent proceeds	2,836,184			
13 Year of substantial completion	2012			

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
14 Were the bonds issued as part of a current refunding issue?	X							
15 Were the bonds issued as part of an advance refunding issue?	X							
16 Has the final allocation of proceeds been made?	X							
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X						

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

Schedule K (Form 990) 2011

DAA

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X						
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ◆	%		%		%		%	
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ◆	%		%		%		%	
6 Total of lines 4 and 5	%		%		%		%	
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?		X						

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X						
2 Is the bond issue a variable rate issue?		X						
3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
4a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5 Were any gross proceeds invested beyond an available temporary period?		X						
6 Did the bond issue qualify for an exception to rebate?		X						

Part V Procedures To Undertake Corrective Action

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations ☐ Yes ☒ No

Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions).

Schedule K - Purpose of Issue Description

COUNTY OF LUCAS, OHIO

(1) FUND CAPITAL PROJECTS; (2) RETIRE PRIOR INDEBTEDNESS; (3) FUND THE DEBT SERVICE RESERVE; (4) PAY FOR BOND ISSUANCE COSTS; AND (5) FINANCE TERMINATION PAYMENTS RELATING TO INTEREST RATE SWAPS.

SCHEDULE L
(Form 990 or 990-EZ)
Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

◆ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
◆ Attach to Form 990 or Form 990-EZ. ◆ See separate instructions.

OMB No. 1545-0047
2011
Open To Public Inspection

Name of the organization
LUTHERAN HOMES SOCIETY, INC.

Employer identification number
31-1565719

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected? Yes	(c) Corrected? No
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 . . . . . ◆ $
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ◆ $

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

	(a) Name of interested person and purpose	(b) Loan to or from the organization? To	(b) Loan to or from the organization? From	(c) Original principal amount	(d) Balance due	(e) In default? Yes	(e) In default? No	(f) Approved by board or committee? Yes	(f) Approved by board or committee? No	(g) Written agreement? Yes	(g) Written agreement? No
(1)											
(2)											
(3)											
(4)											
(5)											
(6)											
(7)											
(8)											
(9)											
(10)											
Total				◆ $							

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of org. revenues? Yes	(e) Sharing of org. revenues? No
(1)	MARSHALL & MELHORN, LLC	FORMER CHAIR	154,734	LEGAL FEES PAID		X
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization
LUTHERAN HOMES SOCIETY, INC.

Employer identification number
31-1565719

Form 990 - Organization's Mission or Most Significant Activities

LUTHERAN HOMES SOCIETY, INC. IS A NOT-FOR-PROFIT CORPORATION THAT PROVIDES RESIDENTIAL CARE AND SUPPORTIVE SERVICES FOR YOUTH AND ELDERLY IN NORTHWESTERN OHIO AND SOUTHEASTERN MICHIGAN. AS A FAITH-BASED PROVIDER OF SUCH SERVICES, LUTHERAN HOMES SOCIETY CONTINUES TO HONOR ITS MISSION TO EXTEND ITS SERVICES TO THE VULNERABLE OF OUR POPULATION. OUR MISSION STATEMENT: AS FOLLOWERS OF CHRIST, WE ARE CALLED DO TO WHAT LIES WITHIN OUR POWER TO SHARE BURDENS THAT WEIGH UPON THE YOUNG AND THE OLD AND TO ALLEVIATE SORROW AND MISERY IN HIS NAME. YOUTH ARE SERVED THROUGH COMMUNITY-BASED RESIDENTIAL TREATMENT GROUP HOMES, SUPPORTIVE SERVICES FOR YOUTH AND THEIR FAMILIES, AND AN ASPERGER'S PROGRAM CONSISTING OF BOTH RESIDENTIAL AND DAY TREATMENT PROGRAMS. THE ELDERLY ARE SERVED IN INDEPENDENT LIVING, ASSISTED LIVING, AND EXTENDED CARE RESIDENTIAL SETTINGS. LUTHERAN HOMES SOCIETY ALSO SERVES THE COMMUNITY THROUGH SERVICE COORDINATION, WHICH ASSISTS THE ELDERLY IN ACCESSING NEEDED SERVICES, THEREBY ENABLING THEM TO CONTINUE LIVING IN INDEPENDENT SETTINGS. OUR LINCS PROGRAM (LUTHERAN INTERFAITH NETWORK OF CARING SERVICES) PROVIDED NONCOMPENSATED SERVICES TO 871 CLIENTS IN 2011, THEREBY ASSISTING THEM IN OBTAINING SERVICES TO ALLOW THEM TO CONTINUE TO LIVE INDEPENDENTLY. THE LINCS PROGRAM IS A TOTALLY BENEVOLENT MINISTRY TO THE COMMUNITY. IN TOTAL FOR 2011, ALL OF LUTHERAN HOMES SOCIETY MINISTRIES PROVIDED OVER $4.1 MILLION IN CHARITABLE CARE AND COMMUNITY BENEFIT. THAT AMOUNT INCLUDES COMMUNITY BENEFIT FOR THOSE UNREIMBURSED FROM MEDICAID.

Form 990, Part III, Line 2

Name of the organization: LUTHERAN HOMES SOCIETY, INC.

Employer identification number: 31-1565719

THE NET ASSETS OF TEN RELATED NON-PROFIT CORPORATIONS MERGED INTO ONE AND CHANGED THE NAME OF THE ENTITY FROM LHS FAMILY & YOUTH SERVICES, INC. TO LUTHERAN HOMES SOCIETY, INC., ASSUMING THIS ORGANIZATION'S EMPLOYER ID NUMBER. AS A RESULT, THE PROGRAM SERVICES NOW REFLECT THE CONSOLIDATION OF THOSE ORGANIZATIONS VERSUS ONLY THE FAMILY & YOUTH PROGRAM AS REPORTED FOR 2010. THIS IS A 990 FILING CHANGE - OPERATIONALLY, THERE WERE NO NEW PROGRAMS ADDED AS THEY ALL EXISTED UNDER SEPARATE RELATED ENTITIES.

Form 990, Part III, Line 4a - First Accomplishment

(CONTINUED) SERVICES INCLUDE THREE NUTRITIOUS MEALS EACH DAY, HOUSEKEEPING, LAUNDRY, MEDICATION MANAGEMENT, SPECIAL EVENTS TRANSPORTATION, PLANNED AND SUPERVISED ACTIVIES, ASSISTANCE WITH DAILY TASKS, THERAPY, AND OTHER SERVICES. THERE ARE ALSO APARTMENTS TO PROVIDE HOUSING FOR THE ELDERLY WHO DON'T REQUIRE THE SERVICES PROVIDED IN THE SKILLED NURSING OR ASSISTED LIVING SETTINGS.

Form 990, Part III, Line 4b - Second Accomplishment

(CONTINUED) BEEN SERVED IN OUT OF HOME PLACEMENT SERVICES. SERVICES PROVIDED INCLUDE COMMUNITY-BASED RESIDENTIAL HOMES, ON-GROUND SBH OR SED CLASSROOMS, PARTNERS IN TREATMENT FAMILY WEEKENDS, MENTORING, DIAGNOSTIC ASSESSMENT, INDIVIDUAL AND GROUP COUNSELING, MENTAL HEALTH EDUCATION, CAMPUS-BASED RESIDENTIAL SERVICES, AND RESIDENTIAL AND DAY-TREATMENT PROGRAMS FOR YOUTH DIAGNOSED WITH ASPERGER'S DISORDER. FAMILY & YOUTH SERVICES HAS ALWAYS BEEN AN EXEMPLARY PROVIDER OF COMPASSIONATE, QUALITY CARE TO THOSE WE SERVE, BUT WE ARE ALSO COMMITTED TO IMPROVING AND CONTRIBUTING TO THE COMMUNITY IN WHICH WE LIVE AND WORK. IN ADDITION TO THE RESIDENTS AND CLIENTS SERVED DIRECTLY, A WIDE VARIETY OF BROAD

Name of the organization: LUTHERAN HOMES SOCIETY, INC.

Employer identification number: 31-1565719

COMMUNITY SUPPORT ACTIVITIES CONTRIBUTE TO THE ACCOMPLISHMENT OF OUR TAX-EXEMPT PURPOSE. FAMILY & YOUTH SERVICE SENIOR LEADERSHIP ALSO PROVIDED SERVICE TO THE COMMUNITY BY SERVING ON COMMUNITY BOARDS, COMMITTEES, OR TASK FORCES, TO ENHANCE THE GENERAL WELFARE OF THE COMMUNITY.

Form 990, Part III, Line 4c - Third Accomplishment

(CONTINUED) RELATED FACILITIES AND SERVICES SPECIALLY DESIGNED TO MEET THE PHYSICAL, SOCIAL AND PSYCHOLOGICAL NEEDS OF THE ELDERLY, AND CONTRIBUTE TO THEIR HEALTH, SECURITY, HAPPINESS AND USEFULNESS AND LONGER LIVING.

Form 990, Part VI, Line 2 - Related Party Information Among Officers

DAVID ROBERTS — LYNN OLMAN

DIRECTOR — CHAIR

MR. ROBERTS PURCHASED PERSONAL AUTO INSURANCE COVERAGE FROM MR. OLMAN'S INSURANCE COMPANY.

Form 990, Part VI, Line 4 - Significant Changes to Organizational Documents

THE ARTICLES OF INCORPORATION HAVE BEEN AMENDED TO REFLECT THE CONSOLIDATION OF TEN RELATED NON-PROFIT CORPORATIONS, AS DESCRIBED IN THE SCHEDULE O RESPONSE TO FORM 990, PART III, LINE 2.

Form 990, Part VI, Line 7a - Election of Members and Their Rights

THE BOARD IS ELECTED BY REPRESENTATIVES OF THE 168 MEMBER CONGREGATIONS.

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members

THE MEMBER CONGEGRATIONS APPROVE CHANGES TO THE ARTICLES OF INCORPORATION

Name of the organization: LUTHERAN HOMES SOCIETY, INC.

Employer identification number: 31-1565719

AND CODE OF REGULATIONS.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

THE TREASURER OF THE BOARD DOES A THOROUGH REVIEW OF THE 990S. DUE TO THE EXCESSIVE NUMBER (18) OF 990S FILED AND PREPARED BY LUTHERAN HOMES SOCIETY AS A PARENT ORGANIZATION, THEY ARE POSTED TO AN INTERNAL WEBSITE UPON COMPLETION FOR REVIEW BY BOARD MEMBERS. AFTER A ONE WEEK REVIEW AND COMMENT PERIOD, THEY ARE FILED WITH THE IRS.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

THE CONFLICTS OF INTEREST POLICY IS ENFORCED THRU THE ACCOUNTS PAYABLE PROCESS AS WELL AS OUR INTERNAL AUDIT PROGRAM.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

THE COMPENSATION OF THE CEO IS APPROVED BY THE BOARD. THE COMPENSATION IS DETERMINED USING WAGE INFORMATION OF COMPARATIVE INDUSTRIES.

Form 990, Part VI, Line 15b - Compensation Process for Officers

THE COMPENSATION OF THE CFO AND OTHER KEY EMPLOYEES IS APPROVED BY THE BOARD. THE COMPENSATION FOR POSITIONS ARE DETERMINED USING WAGE INFORMATION OF COMPARATIVE INDUSTRIES.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICIES AND FINANCIAL STATEMENTS ARE ALL MADE AVAILABLE UPON REQUEST.

Form 990, Part XI, Line 5 - Other Changes in Net Assets Explanation

Name of the organization: LUTHERAN HOMES SOCIETY, INC.

Employer identification number: 31-1565719

NET ASSETS TRANSFERRED FROM MERGED ENTITIES	$17,599,214
ELIMINATE INTERCOMPANY NET ASSETS INCLUDED ABOVE	($2,582,727)
CHANGE IN INTEREST IN LHS FOUNDATION	$334,350
UNREALIZED GAIN/LOSS ON INVESTMENTS	($58,767)
PRIOR YEAR ADJUSTMENT	$200
	$15,292,270

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization

LUTHERAN HOMES SOCIETY, INC.

Employer identification number

31-1565719

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) Section 512(b)(13) controlled entity? No
(1) LHS FOUNDATION, INC. 2021 NORTH MCCORD ROAD 34-1678593 TOLEDO OH 43615	FUND CORP	OH	501C3	11d	NO		X
(2) LHS MANAGEMENT SERVICES, INC. 2021 NORTH MCCORD ROAD 34-1930333 TOLEDO OH 43615	MGMT SERV	OH	501C3	9	NO		X
(3) LUTHERAN DEVELOPMENT CORPORATION 2021 NORTH MCCORD ROAD 31-1275380 TOLEDO OH 43615	SR LIVING	OH	501C3	9	NO		X
(4) LUTHERAN HOUSING SERVICES, INC. 2021 NORTH MCCORD ROAD 34-1268346 TOLEDO OH 43615	SR LIVING	OH	501C3	9	NO		X
(5) LUTHERAN HOUSING SERVICES #1, INC. 2021 NORTH MCCORD ROAD 34-1313004 TOLEDO OH 43615	SR LIVING	OH	501C3	9	NO		X

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

LUTHERAN HOMES SOCIETY, INC.

Employer identification number

31-1565719

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) No
(1) LUTHERAN HOUSING SERVICES #2, INC. 2021 NORTH MCCORD ROAD 34-1313006 TOLEDO OH 43615	SR LIVING	OH	501C3	9	NO		X
(2) LUTHERAN HOUSING SERVICES #3, INC. 2021 NORTH MCCORD ROAD 34-1313007 TOLEDO OH 43615	SR LIVING	OH	501C3	9	NO		X
(3) LUTHERAN HOUSING SERVICES #5, INC. 2021 NORTH MCCORD ROAD 34-1313009 TOLEDO OH 43615	SR LIVING	OH	501C3	9	NO		X
(4) LUTHERAN HOUSING SERVICES #6, INC. 2021 NORTH MCCORD ROAD 34-1364623 TOLEDO OH 43615	SR LIVING	OH	501C3	9	NO		X
(5) LUTHERAN HOUSING SERVICES #7, INC. 2021 NORTH MCCORD ROAD 34-1364624 TOLEDO OH 43615	SR LIVING	OH	501C3	9	NO		X

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

LUTHERAN HOMES SOCIETY, INC.

Employer identification number

31-1565719

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) Section 512(b)(13) controlled entity? No
(1) LUTHERAN HOUSING SERVICES #8, INC. 2021 NORTH MCCORD ROAD 34-1752591 TOLEDO OH 43615	SR LIVING	OH	501C3	9	NO		X
(2) LUTHERAN HOUSING SERVICES #9, INC. 2021 NORTH MCCORD ROAD 34-1801635 TOLEDO OH 43615	SR LIVING	OH	501C3	9	NO		X
(3) LUTHERAN HOUSING SERVICES #10, INC. 2021 NORTH MCCORD ROAD 31-1515028 TOLEDO OH 43615	SR LIVING	OH	501C3	9	NO		X
(4) LUTHERAN HOUSING SERVICES #12, INC. 2021 NORTH MCCORD ROAD 31-1515034 TOLEDO OH 43615	SR LIVING	OH	501C3	9	NO		X
(5) LUTHERAN HOUSING SERVICES #13, INC. 2021 NORTH MCCORD ROAD 34-1889735 TOLEDO OH 43615	SR LIVING	OH	501C3	9	NO		X

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

LUTHERAN HOMES SOCIETY, INC.

Employer identification number

31-1565719

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) Section 512(b)(13) controlled entity? No
(1) LUTHERAN HOUSING SERVICES #18, INC. 2021 NORTH MCCORD ROAD 30-0037439 TOLEDO OH 43615	SR LIVING	OH	501C3	9	NO		X
(2) CREEKSIDE CONDO OWNER'S ASSOCIATION 2021 NORTH MCCORD ROAD 34-1878025 TOLEDO OH 43615	SR LIVING	OH	501C6		NO		X
(3) BAVARIAN VILLAGE CONDO OWNER'S ASSO 2021 NORTH MCCORD ROAD 34-1671358 TOLEDO OH 43615	SR LIVING	OH	501C6		NO		X
(4)							
(5)							

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

DAA

Schedule R (Form 990) 2011

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

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate alloc.? Yes	(h) Disproportionate alloc.? No	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) General or managing partner? No	(k) Percentage ownership
(1)													
(2)													
(3)													
(4)													

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1)								
(2)								
(3)								
(4)								

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

		Yes	No
1	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?		
a	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a		X
b	Gift, grant, or capital contribution to related organization(s)	1b		X
c	Gift, grant, or capital contribution from related organization(s)	1c	X	
d	Loans or loan guarantees to or for related organization(s)	1d	X	
e	Loans or loan guarantees by related organization(s)	1e	X	
f	Sale of assets to related organization(s)	1f		X
g	Purchase of assets from related organization(s)	1g		X
h	Exchange of assets with related organization(s)	1h		X
i	Lease of facilities, equipment, or other assets to related organization(s)	1i		X
j	Lease of facilities, equipment, or other assets from related organization(s)	1j		X
k	Performance of services or membership or fundraising solicitations for related organization(s)	1k	X	
l	Performance of services or membership or fundraising solicitations by related organization(s)	1l		X
m	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1m		X
n	Sharing of paid employees with related organization(s)	1n		X
o	Reimbursement paid to related organization(s) for expenses	1o	X	
p	Reimbursement paid by related organization(s) for expenses	1p	X	
q	Other transfer of cash or property to related organization(s)	1q		X
r	Other transfer of cash or property from related organization(s)	1r		X

2 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.

	(a) Name of other organization	(b) Transaction type (a–r)	(c) Amount involved	(d) Method of determining amount involved
(1)	LHS FOUNDATION, INC.	c	786,028	CASH REC'D
(2)	LHS FOUNDATION, INC.	k	312,552	MGMT FEE CALC
(3)	LUTHERAN HOUSING SERVICES #9, INC.	q	195,582	CASH PAID
(4)	LUTHERAN HOUSING SERVICES #1, INC.	k	64,835	MGMT FEE CALC
(5)	LHS FOUNDATION, INC.	e	1,487,419	UNPAID PRINCIPAL BALANCE
(6)	LUTHERAN HOUSING SERVICES, INC.	n	117,254	COST

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

		Yes	No
1	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?		
a	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		X
b	Gift, grant, or capital contribution to related organization(s)		X
c	Gift, grant, or capital contribution from related organization(s)	X	
d	Loans or loan guarantees to or for related organization(s)	X	
e	Loans or loan guarantees by related organization(s)	X	
f	Sale of assets to related organization(s)		X
g	Purchase of assets from related organization(s)		X
h	Exchange of assets with related organization(s)		X
i	Lease of facilities, equipment, or other assets to related organization(s)		X
j	Lease of facilities, equipment, or other assets from related organization(s)		X
k	Performance of services or membership or fundraising solicitations for related organization(s)	X	
l	Performance of services or membership or fundraising solicitations by related organization(s)		X
m	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
n	Sharing of paid employees with related organization(s)		X
o	Reimbursement paid to related organization(s) for expenses	X	
p	Reimbursement paid by related organization(s) for expenses	X	
q	Other transfer of cash or property to related organization(s)		X
r	Other transfer of cash or property from related organization(s)		X

2 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

	(a) Name of other organization	(b) Transaction type (a–r)	(c) Amount involved	(d) Method of determining amount involved
(1)	LUTHERAN HOUSING SERVICES #2, INC.	n	112,874	COST
(2)	LUTHERAN HOUSING SERVICES #2, INC.	d	63,992	UNPAID ADVANCES
(3)	LUTHERAN HOUSING SERVICES #3, INC.	n	85,529	COST
(4)	LUTHERAN HOUSING SERVICES #18, INC.	d	99,221	UNPAID ADVANCES
(5)	LUTHERAN HOUSING SERVICES #18, INC.	n	77,911	COST
(6)	LUTHERAN HOUSING SERVICES #5, INC.	d	61,573	UNPAID PRINCIPAL BALANCE

Part V **Transactions With Related Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

			Yes	No
1	*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?*			
a	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a		X
b	Gift, grant, or capital contribution to related organization(s)	1b		X
c	Gift, grant, or capital contribution from related organization(s)	1c	X	
d	Loans or loan guarantees to or for related organization(s)	1d	X	
e	Loans or loan guarantees by related organization(s)	1e	X	
f	Sale of assets to related organization(s)	1f		X
g	Purchase of assets from related organization(s)	1g		X
h	Exchange of assets with related organization(s)	1h		X
i	Lease of facilities, equipment, or other assets to related organization(s)	1i		X
j	Lease of facilities, equipment, or other assets from related organization(s)	1j		X
k	Performance of services or membership or fundraising solicitations for related organization(s)	1k	X	
l	Performance of services or membership or fundraising solicitations by related organization(s)	1l		X
m	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1m		X
n	Sharing of paid employees with related organization(s)	1n		X
o	Reimbursement paid to related organization(s) for expenses	1o	X	
p	Reimbursement paid by related organization(s) for expenses	1p	X	
q	Other transfer of cash or property to related organization(s)	1q		X
r	Other transfer of cash or property from related organization(s)	1r		X

2 *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.*

	(a) Name of other organization	(b) Transaction type (a–r)	(c) Amount involved	(d) Method of determining amount involved
(1)	LUTHERAN HOUSING SERVICES #5, INC.	n	96,067	COST
(2)	LUTHERAN HOUSING SERVICES #1, INC.	d	112,158	UNPAID ADVANCES
(3)	LUTHERAN HOUSING SERVICES #1, INC.	n	207,514	COST
(4)	LUTHERAN HOUSING SERVICES #10, INC.	d	85,815	UNPAID ADVANCES
(5)	LUTHERAN HOUSING SERVICES #10, INC.	n	76,566	COST
(6)	LUTHERAN HOUSING SERVICES #12, INC.	d	54,869	CONSTRUCTION ADVANCES

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

			Yes	No
1	*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?*			
a	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a		X
b	Gift, grant, or capital contribution to related organization(s)	1b		X
c	Gift, grant, or capital contribution from related organization(s)	1c	X	
d	Loans or loan guarantees to or for related organization(s)	1d	X	
e	Loans or loan guarantees by related organization(s)	1e	X	
f	Sale of assets to related organization(s)	1f		X
g	Purchase of assets from related organization(s)	1g		X
h	Exchange of assets with related organization(s)	1h		X
i	Lease of facilities, equipment, or other assets to related organization(s)	1i		X
j	Lease of facilities, equipment, or other assets from related organization(s)	1j		X
k	Performance of services or membership or fundraising solicitations for related organization(s)	1k	X	
l	Performance of services or membership or fundraising solicitations by related organization(s)	1l		X
m	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1m		X
n	Sharing of paid employees with related organization(s)	1n		X
o	Reimbursement paid to related organization(s) for expenses	1o	X	
p	Reimbursement paid by related organization(s) for expenses	1p	X	
q	Other transfer of cash or property to related organization(s)	1q		X
r	Other transfer of cash or property from related organization(s)	1r		X

2 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.

	(a) Name of other organization	(b) Transaction type (a–r)	(c) Amount involved	(d) Method of determining amount involved
(1)	LUTHERAN HOUSING SERVICES #7, INC.	d	1,025,775	UNPAID PRINCIPAL & INT.
(2)	LUTHERAN HOUSING SERVICES #9, INC.	d	1,254,535	UNPAID PRINCIPAL BALANCE
(3)	LUTHERAN HOUSING SERVICES #6, INC.	d	671,769	UNPAID PRINCIPAL & INT.
(4)	LUTHERAN DEVELOPMENT CORPORATION	d	248,965	UNPAID PRINCIPAL BALANCE
(5)	CREEKSIDE CONDO OWNER'S ASSOCIATION	d	341,875	UNPAID PRINCIPAL BALANCE
(6)	LUTHERAN HOUSING SERVICES #8, INC.	d	312,154	UNPAID PRINCIPAL & INT.

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations? Yes	(e) No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													

Part VII **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

Forms 990 / 990-PF

Other Notes and Loans Receivable

2011

For calendar year 2011, or tax year beginning , and ending

Name

LUTHERAN HOMES SOCIETY, INC.

Employer Identification Number

31-1565719

Form 990, Part X, Line 7 - Additional Information

	Name of borrower	Relationship to disqualified person
(1)	LUTHERAN HOUSING SERVICES #6	RELATED PARTY
(2)	LUTHERAN HOUSING SERVICES #7	RELATED PARTY
(3)	LUTHERAN HOUSING SERVICES #8	RELATED PARTY
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

	Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1)	180,000	10/12/94		DUE UPON EXP OF TAX CREDIT	8.000
(2)	222,542	03/08/94		DEMAND NOTE	9.000
(3)	315,000	12/29/95		NO REPAYMENT TERMS	5.360
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

	Security provided by borrower	Purpose of loan
(1)	PROPERTY	
(2)	PROPERTY	
(3)	PROPERTY	
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

	Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year	Fair market value (990-PF only)
(1)			680,129	
(2)			1,013,902	
(3)			287,460	
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Totals			1,981,491	

Forms 990 / 990-PF

Mortgages and Other Notes Payable

For calendar year 2011, or tax year beginning , and ending

2011

Name

LUTHERAN HOMES SOCIETY, INC.

Employer Identification Number

31-1565719

Form 990, Part X, Line 23 - Additional Information

	Name of lender	Relationship to disqualified person
(1)	FIFTH THIRD BANK	
(2)	FIFTH THIRD BANK	
(3)	FORD CREDIT	
(4)	ALLY	
(5)	FIFTH THIRD BANK	
(6)	ST. LUKE'S HOSPITAL	
(7)	ALLY	
(8)		
(9)		
(10)		

	Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1)	28,151	06/13/07	06/30/11	$667/MONTH	6.290
(2)	77,366	03/01/08	02/01/12	$1830/MO PRIN & INT	6.370
(3)	16,094	11/11/08	08/01/13	$342/MO PRIN AND INT	9.990
(4)	39,120	12/28/11	12/28/17	$543.33/MONTH	0.000
(5)	56,000	01/15/09	01/15/14	$1,050.39 MONTHLY PAYMENTS	4.750
(6)	3,607,482	12/01/10	12/01/20	DUE@MATURITY; MO.INT.PMTS.	4.000
(7)	40,412	12/28/11	12/28/17	$561.28/MONTH	0.000
(8)					
(9)					
(10)					

	Security provided by borrower	Purpose of loan
(1)	VEHICLE	FINANCE PURCHASE OF VEHICLE
(2)	VEHICLES	PURCHASE OF THREE VEHICLES
(3)	VEHICLE	FINANCE PURCHASE OF VEHICLE
(4)	2011 CHEVY SILVERADO (WHITE)	PURCHASE 2011 CHEVY SILVERADO
(5)		FINANCE SENIOR TV GROVE,HILLS,RIDGE
(6)		REPAY INVESTOR'S SHARE IN INVESTMNT
(7)	2011 CHEVY SILVERADO (BLUE)	PURCHASE 2011 CHEVY SILVERADO
(8)		
(9)		
(10)		

	Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year
(1)	VEHICLE	3,835	
(2)	THREE VEHICLES	24,446	1,790
(3)	VEHICLE	9,569	4,484
(4)			38,576
(5)			23,982
(6)			3,397,203
(7)			39,851
(8)			
(9)			
(10)			
Totals		37,850	3,505,886

Form 990

Tax-Exempt Bond Liabilities

For calendar year 2011, or tax year beginning , and ending

2011

Name

LUTHERAN HOMES SOCIETY, INC.

Employer Identification Number

31-1565719

Form 990, Part X, Line 20 - Additional Information

	Name of lender	Purpose of issue
(1)	COUNTY OF LUCAS, OHIO	SEE SCHEDULE K
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

	Issue date	Original amount of issue	Form 8038 filed: Y/N	Form 8038 filed: Date filed	Date retired	Completion date of project	Unexpended bond proceeds
(1)	12/09/10	31,945,000	N		11/01/45	08/27/12	2,836,184
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							

	Third party use percent	Maturity date	Repayment terms	Interest rate
(1)		11/01/45	QTLY INT; ANNU REDEMPTIONS	6.375
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

	Security provided by borrower	Amount outstanding at beginning of year	Amount outstanding at end of year
(1)	REAL ESTATE		31,770,000
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Totals			31,770,000

CORPORATION NOT FOR PROFIT

AMENDED AND RESTATED
ARTICLES OF INCORPORATION

of

LUTHERAN HOMES SOCIETY, INC.

REQUIRED DOCUMENTS DUE TO NAME CHANGE

ARTICLE I

The name of said Corporation shall be Lutheran Homes Society, Inc.

ARTICLE II

The place in Ohio where its principal office is to be located is Springfield Township, Lucas County, Ohio.

ARTICLE III

This Corporation is organized and shall be operated exclusively for charitable, religious, scientific and educational purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (including the regulations thereunder), or the corresponding provision of any subsequent federal tax law (the "Code"). This Corporation shall carry on only activities permitted to be carried on (a) by a corporation exempt from federal income tax under Section 501(c)(3) of the Code or (b) by a corporation, contributions to which are deductible under Section 170(c)(2) of the Code. The Corporation's purposes include the following:

1. To become the sole or majority corporate member of not-for-profit corporations (the "Subsidiaries"), whether newly-formed or already in existence, which Subsidiaries have qualified or will qualify for tax-exempt treatment under section 501(c)(3) and are or will be described in section 509(a)(1) of the Code, which are or will be engaged in:

a) the care, feeding and housing of older persons on an intermediate, extended and acute basis;

b) providing elderly persons rental housing and related facilities and services specially designed to meet the physical, social and psychological needs of the aged;

c) providing services to families and youth through community based group homes and foster care facilities, managed care contracts, and supplementary support services;

2. To promote and facilitate the charitable, religious, educational, and scientific purposes of the Subsidiaries by providing said Subsidiaries, exclusively, with benefits and services to the full extent permissible under section 509(a)(d)(A) of the Code, such purposes to include but not be limited to:

a) providing executive management in terms of supervision, strategic planning, policy formulation and advocacy;
b) engaging in activities intended to assist the Subsidiaries directly or indirectly in promoting the general health and welfare of communities in which the Subsidiaries may operate:
c) promoting the more efficient utilization of resources through the exercise of purchasing power, construction consultation, data processing, and other special services; the efficient deployment of scarce and expensive manpower and equipment; and the coordination and provision of training, instruction, or continuing education to persons employed by the Subsidiaries;
d) purchasing or creating, owning and holding, to the extent permissible for a tax-exempt organization under section 501(c)(3) of the Code, the stock of for-profit corporations that are designed to further promote and facilitate the charitable, religious, educational, and scientific purposes of the Subsidiaries, provided however, that the Corporation shall not perform services for such for-profit subsidiaries;
e) raising and receiving funds by donation, bequest, dividend, or otherwise and holding, investing, and disbursing such funds to the Subsidiaries; and
f) providing pastoral care, fiscal, human resource, and church and public relations services, including defining programmatic needs and providing supplementary services to achieve the mission of the Subsidiaries; and
g) doing any and all things necessary or incident to the foregoing, including every act and thing covered generally by the denomination "not-for-profit holding corporation."

3. To engage in any kind of activity, and to enter into, perform, and carry out contracts of any kind, necessary or in connection with, or incidental to the accomplishments of any one or more of the nonprofit purposes of the Corporation. Nothing herein contained, however, shall be deemed to authorize the Corporation to engage in activities not permissible under section 509(a)(3)(A) of the Code.

ARTICLE IV

This Corporation is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations, including the Subsidiaries, that qualify as exempt organizations under Section 501(c)(3) of the Code.

ARTICLE V

The affairs of the Corporation shall be managed by a Board of Directors consisting of not less than seven Directors, elected by the members of the Corporation, in the manner provided for in the Code of Regulations.

ARTICLE VI

The membership of this Corporation, at all times, shall consist of those Lutheran congregations who vote to become members of the Corporation.

ARTICLE VII

Each member congregation of five hundred confirmed members or less shall be entitled to two voting delegates at meetings of the members of the Corporation in addition to a pastoral delegate. Congregations with more than five hundred confirmed members shall be entitled to one additional voting delegate for each additional five hundred confirmed members or fraction thereof.

ARTICLE VIII

A Code of Regulations for the Corporation, consistent with these Amended and Restated Articles of Incorporation, shall be adopted by the members and may be amended only as provided therein.

ARTICLE IX

The duration of the Corporation shall be perpetual.

ARTICLE X

No part of the net earnings of the Corporation shall inure to the benefit of or be distributable to, its members, directors, officers or other private persons, except that the Corporation shall be authorized and empowered to pay a reasonable compensation for services rendered and to make payments and distributions in furtherance of the purpose set forth in Article III hereof.

No material part of the activities of the Corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the Corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of any candidate for public office.

Notwithstanding any other provision of these Articles, the Corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from Federal Income Tax under Section 501(c)(3) of the Code or (b) by a corporation, contributions to which are deductible under Section 170(c)(2) of the Code or any amendment thereto.

ARTICLE XI

Upon the dissolution of the Corporation, the Board of Directors shall, after paying, or making provision for the payment of all the liabilities of the Corporation, dispose of all of the assets of the Corporation exclusively for the purposes of the Corporation in such manner, or to such organization or organizations organized and operating exclusively for charitable, educational, religious, or scientific purpose as shall at the time qualify as an exempt organization or organizations under Section 501 (c)(3) of the Code , as the Board of Directors shall determine. Any of such assets not so disposed of, shall be disposed of by the Court of Common Pleas of the County in which the principal office of the Corporation is then located, exclusively for such purposes or to such organization or organizations, as the Court shall determine, which are organized and operated exclusively for such purposes. It is expected that each member congregation qualifying as an exempt organization under section 501(c)(3) of the Code at the date of dissolution shall receive that portion of the assets of this Corporation which the total number of confirmed members of each member congregation in the designated service area bears to the total numbers of confirmed members of all participants in the service area. In the event that any member congregation is not permitted, for any reason, to take or hold such assets, that portion of such assets shall be distributed among the remaining member congregations.

ARTICLE XII

These Articles of Incorporation, except Articles X and XI hereof may be amended, pursuant to the laws of the State of Ohio, at any annual meeting of members, or at any special meeting called for that purpose.

Doc ID --> 201036301523

DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
12/30/2010	201036301523	MERGER/DOMESTIC (MER)	125.00	100.00		.00	.00

Receipt
This is not a bill. Please do not remit payment.

MARSHALL & MELHORN, LLC
ATTN:ANITA L. HAHN
FOUR SEAGATE,8TH FL
TOLEDO, OH 43604

STATE OF OHIO
CERTIFICATE
Ohio Secretary of State, Jennifer Brunner

990883

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

LUTHERAN HOMES SOCIETY, INC.

and, that said business records show the filing and recording of:

Document(s)	Document No(s):
MERGER/DOMESTIC	201036301523

United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 31st day of December, A.D. 2010.

Ohio Secretary of State

Doc ID --> 201036301523

DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
12/30/2010	201036301523	MERGED OUT OF EXISTENCE (MEX)	.00	00	.00	.00	.00

Receipt
This is not a bill. Please do not remit payment.

MARSHALL & MELHORN, LLC
ATTN:ANITA L. HAHN
FOUR SEAGATE,8TH FL
TOLEDO, OH 43604

STATE OF OHIO
CERTIFICATE
Ohio Secretary of State, Jennifer Brunner

993543

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

LHS HOUSING, INC.

and, that said business records show the filing and recording of:

Document(s)	Document No(s):
MERGED OUT OF EXISTENCE	201036301523

United States of America
State of Ohio
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Ohio Secretary of State

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ATTN:ANITA L. HAHN
FOUR SEAGATE,8TH FL
TOLEDO, OH 43604

STATE OF OHIO
CERTIFICATE
Ohio Secretary of State, Jennifer Brunner

970026

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

LUTHERAN HOMES SOCIETY, INC.

and, that said business records show the filing and recording of:

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State of Ohio
Office of the Secretary of State

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Jennifer Brunner

Ohio Secretary of State

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MARSHALL & MELHORN, LLC
ATTN:ANITA L. HAHN
FOUR SEAGATE,8TH FL
TOLEDO, OH 43604

STATE OF OHIO
CERTIFICATE
Ohio Secretary of State, Jennifer Brunner

856129

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

LUTHERAN HOUSING SERVICES #4, INCORPORATED

and, that said business records show the filing and recording of:

Document(s)	Document No(s):
MERGED OUT OF EXISTENCE	**201036301523**

United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 31st day of December, A.D. 2010.

Ohio Secretary of State

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MARSHALL & MELHORN, LLC
ATTN:ANITA L. HAHN
FOUR SEAGATE,8TH FL
TOLEDO, OH 43604

STATE OF OHIO
CERTIFICATE
Ohio Secretary of State, Jennifer Brunner

460397

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

LUTHERAN MEMORIAL HOME

and, that said business records show the filing and recording of:

Document(s)	Document No(s):
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United States of America
State of Ohio
Office of the Secretary of State

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Ohio Secretary of State

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MARSHALL & MELHORN, LLC
ATTN:ANITA L. HAHN
FOUR SEAGATE,8TH FL
TOLEDO, OH 43604

STATE OF OHIO
CERTIFICATE
Ohio Secretary of State, Jennifer Brunner

907608

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

THE LUTHERAN ORPHANS' AND OLD FOLKS' HOME SOCIETY AT NAPOLEON, OHIO #2, INC.

Document(s)	Document No(s):
MERGED OUT OF EXISTENCE	201036301523

United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 31st day of December, A.D. 2010.

Ohio Secretary of State

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MARSHALL & MELHORN, LLC
ATTN:ANITA L. HAHN
FOUR SEAGATE,8TH FL
TOLEDO, OH 43604

STATE OF OHIO
CERTIFICATE
Ohio Secretary of State, Jennifer Brunner

602021

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

THE LUTHERAN ORPHANS' AND OLD FOLKS' HOME SOCIETY AT NAPOLEON, OHIO, INC.

and, that said business records show the filing and recording of:

Document(s)	Document No(s):
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United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 31st day of December, A.D. 2010.

Ohio Secretary of State

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MARSHALL & MELHORN, LLC
ATTN:ANITA L. HAHN
FOUR SEAGATE,8TH FL
TOLEDO, OH 43604

STATE OF OHIO
CERTIFICATE
Ohio Secretary of State, Jennifer Brunner

904582

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

THE LUTHERAN ORPHANS' AND OLD FOLKS' HOME SOCIETY AT WOLF CREEK, INC.

and, that said business records show the filing and recording of:

Document(s)	Document No(s):
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State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 31st day of December, A.D. 2010.

Jennifer Brunner

Ohio Secretary of State

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MARSHALL & MELHORN, LLC
ATTN:ANITA L. HAHN
FOUR SEAGATE,8TH FL
TOLEDO, OH 43604

STATE OF OHIO
CERTIFICATE
Ohio Secretary of State, Jennifer Brunner

993906

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

THE LUTHERAN ORPHANS' AND OLD FOLKS' HOME SOCIETY OF TOLEDO, OHIO #2, INC.

and, that said business records show the filing and recording of:

Document(s)	Document No(s):
MERGED OUT OF EXISTENCE	**201036301523**

United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 31st day of December, A.D. 2010.

Ohio Secretary of State

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MARSHALL & MELHORN, LLC
ATTN:ANITA L. HAHN
FOUR SEAGATE,8TH FL
TOLEDO, OH 43604

STATE OF OHIO
CERTIFICATE
Ohio Secretary of State, Jennifer Brunner

25447

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

THE LUTHERAN ORPHANS' AND OLD FOLKS' HOME SOCIETY, OF TOLEDO, OHIO

and, that said business records show the filing and recording of:

Document(s)	Document No(s):
MERGED OUT OF EXISTENCE	**201036301523**

United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 31st day of December, A.D. 2010.

Ohio Secretary of State