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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public.

OMB No 1545-0047

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

<u>A</u>	For the	e 2013 calendar year, or tax year beginning and endin	ıg		
В	Check if applicable	C Name of organization		D Employer identif	ication number
Г	Addre	S CENTRAL LUTHERAN FOUNDATION			
Ē	Name chang			93-0	762860
Ē	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room.	/suite	E Telephone number	
Ē	Termu		, , , , , ,	•	-485-8567
Ē	ated Ameni return	ded C		G Gross receipts \$	79,424.
Ē	Applic			H(a) is this a group i	
_	pendı	F Name and address of principal officer:RICHARD BREMER		for subordinate	
		SAME AS C ABOVE		H(b) Are all subordinates	
1	Tax-ex	empt status: X 501(c)(3) 501(c) ()	527	• •	a list (see instructions)
		te: N/A	~	H(c) Group exempte	
			Year o		M State of legal domicile: OR
	art I	Summary			•
	. 1	Briefly describe the organization's mission or most significant activities THE FOU	NDA	TION SUPPOR	RTS THE
Governance		ACTIVITIES OF CENTRAL LUTHERAN CHURCH IN EU			THE
rna	2	Check this box if the organization discontinued its operations or disposed of	more	than 25% of its net a	ssets
ove	З 3	Number of voting members of the governing body (Part VI, line 1a)		3	7
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	7
Activities &	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)		5	0
Ziţi.	6	Total number of volunteers (estimate if necessary)		6	0
Ç	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
٩		Net unrelated business taxable income from Form 990-T, line 34		7b	0.
				Prior Year	Current Year
Φ	8	Contributions and grants (Part VIII, line 1h)		5,687.	17,718.
nu.	9	Program service revenue (Part VIII, line 2g)		0.	0.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		40,502.	61,706.
<u> </u>	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue - add lines 8 through 11 (must equal Part VIII, column (A) line 12)	∖∟	0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, columnal (A) Tine 12)	37	46,189.	
	13	Grants and similar amounts paid (Part IX, column (A), lines 13) Benefits paid to or for members (Part IX, column (A), line 4)	(4 <u>)</u>	36,450.	72,200.
		Benefits paid to or for members (Part IX, column (A), line 4)	,[. 0.	0.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A) lines 5-10)		0.	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		<u> </u>	0.
ăx	- ь	Total fundraising expenses (Part IX, column (D), line 25)			
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	-	8,679.	
		Total expenses Add lines 13-17 (must equal Part IX, column (À), line 25)	<u> </u>	45,129.	
	19	Revenue less expenses Subtract line 18 from line 12	_	1,060.	2,379.
Net Assets or	2		Beg	inning of Current Year	End of Year
Sset	20	Total assets (Part X, line 16)		1,690,044.	1,855,906.
H A	≦ 21	Total liabilities (Part X, line 26)	<u> </u>	0.	
	22	Net assets or fund balances. Subtract line 21 from line 20		1,690,044.	1,855,906.
	art II	Signature Block			
	-	lties of perjury, I declare that I have examined this return, including accompanying schedules and s			ry knowledge and belief, it is
true	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which pre	eparer	has any knowledge.	- ///
		Signature of officer Trensurer		Date	3.19
Sig				Date	
He	re	JOANNE HYNES, TREASURER Type or print name and title			
			I D.	ate Check	PTIN
D - '		Print/Type preparer's name Preparer's signature Preparer's signature	- 1	50-14 # "	—— ' [
Pai		WILLIAM E. MAAS		- J Seit Cilipio	
	parer	Firm's name EMERALD CPA GROUP LLP		Firm's EIN	45-1582096
USE	Only	Firm's address 450 COUNTRY CLUB ROAD, SUITE 155		Dhone no / E	41) 255-2888
_	Ale - 15	EUGENE, OR 97401-6078		Phone no. (5	X Yes No
	on 10-2	RS discuss this return with the preparer shown above? (see instructions)			Form 990 (2013)
127	10-2	esta in transfer experiences medication activiouse, see the separate instructions.			101111 000 (2010)

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form	n 990 (2013) CENTRAL LUTHERAN FOUNDATION	<u>93-0762860</u>	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:		
•	THE FOUNDATION SUPPORTS THE ACTIVITIES OF CENTRAL LUTHER	RAN CHURCH T	VI.
	EUGENE, OREGON AND FUNDS MISSIONS, PROVIDES SCHOLARSHIPS		
		O' WIND MAKES	
	GRANTS TO OTHER CHARITABLE ORGANIZATIONS.		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O.		
_	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Voc	X No
3		L1es	ואט באב
	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		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	rs, the total expenses, a	ınd
	revenue, if any, for each program service reported.		
4a	(Code) (Expenses \$ 60,700. including grants of \$ 60,700.) (Revenue	ie \$)
	CHARITABLE GRANTS WERE WERE MADE TO VARIOUS LOCAL, NATIO		
	INTERNATIONAL CHARITIES.	2111111 111112	
	INTERNATIONAL CHARITIES.		
4b	(Code) (Expenses \$11,500. including grants of \$11,500.) (Revenue	ie\$)
	SCHOLARSHIPS ARE PROVIDED TO QUALIFIED CANDIDATES WHO AM		THE
	LUTHERAN COMMUNITY TO HELP FUND THEIR EDUCATION. EIGHT S		
		CHOLIMOITTED	
	WERE AWARDED IN 2013.		
	–		
4c	(Code) (Eventual \$ polytique grants of \$) (Revent	in \$	
4c	(Code) (Expenses \$	rie \$)
4c	(Code) (Expenses \$	rie \$)
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4c	(Code) (Expenses \$	le \$)
4c	(Code) (Expenses \$	le \$)
4c	(Code) (Expenses \$	le \$)
4c	(Code) (Expenses \$ including grants of \$) (Revenue)	le \$)
4c	(Code) (Expenses \$	le \$)
4c	(Code) (Expenses \$	le \$)
		le \$)
	(Code) (Expenses \$	le \$)
	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$	Je \$)
4d	Other program services (Describe in Schedule O.))	90 (2013)

Form 990 (2013) CENTRAL LUTHERAN FOUNDATION
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)?		l	}
_	If "Yes," complete Schedule A	1	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	<u> </u>
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			v
^	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			!
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			х
40	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	9		
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	40		х
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	10		\bigcap
• •	as applicable.			
2	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
a	Part VI	11a		х
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	· i u		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	ĺ
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		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			_==
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
	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		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			<u> </u>
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		'	ĺ
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
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		i	
	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 other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		j	~~
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			7-
	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,"			77
	complete Schedule G, Part III	19		_ <u>X</u> _
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>X</u>
_b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	990 (2012
		corm	ココレ !	~111.51

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government 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 or 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 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c	L	
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	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		Х
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).			37
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	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	<u> </u>	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	20		x
	contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations?	31		x
	If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		х
~~	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- OZ		
33	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		x
0.4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	- 00		
34		34		х
05-	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
В	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
30	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			
o,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38_	Х	
		Form	990	(2013)

	•					
Form 990	(2013)		CENTRAL	LUTHERAN	FOUNDATION	T
Part V	Stat	tements P	Regarding Otl	her IRS Filings	s and Tax Comp	liance

	Check if Schedule O contains a response or note to any line in this Part V			\Box
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1 1	1	
	(gambling) winnings to prize winners?	1c		
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b_		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		1	
За	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," to line 3b, 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		1	
	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.			
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u>X</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	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		1	
	any contributions that were not tax deductible as charitable contributions?	6a		<u> </u>
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		<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			v
	to file Form 8282?	7c		<u> </u>
	If "Yes," indicate the number of Forms 8282 filed during the year	7-		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		
f	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	71 7g		
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	'''		
Ü	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.			
	Did the organization make any taxable distributions under section 4966?	9a	ŀ	
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter.			
	Initiation fees and capital contributions included on Part VIII, line 12		ŀ	
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:	. 1		
а	Gross income from members or shareholders	.		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)	.		
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		ſ	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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		ļ	
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> </u>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	990 (2012
		LOUIN	33U (ZU 13)

Form 990 (2013) CENTRAL LUTHERAN FOUNDATION 93-0762860 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	to line 6a, 6b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI	_		X
Sec	tìon A. Governing Body and Management			,
	l 1		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 7			
	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 0.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 7			
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	_		47
_	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		_		7.7
	more members of the governing body?	7a		X
d	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			3.7
_	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 ,		8a	X	
	Each committee with authority to act on behalf of the governing body?	8b	<u> </u>	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	_		Х
S_C	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		
566	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Yes	No
100	Did the examplestion have local chapters, branches, or offiliates?	10a	165	X
	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		Λ
D	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	I IG		
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	,,,,,		
·	in Schedule O how this was done	12c		
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?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	l	-	
	ın joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's		1	
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
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) a	vailab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	l finan	cıal	
	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 organizat	on. 🕨	·	
	JOANNE HYNES, TREASURER - 541-343-7265			
	1957 ορφαίο απρέδα είτατα ρο 97/03			

Form	aan	(2013)	

CENTRAL LUTHERAN FOUNDATION

93-0762860

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

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

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

(A) Name and Title	(B) Average	(do	(C) Position (do not check more			1 than	оле	ed any current officer, of (D) Reportable	(E) Reportable	(F) Estimated
	hours per week	box	, unle cer ar	ss pe nd a d	rson	is bot	h an	compensation from	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) RICHARD BREMER	1.00							0.		_
PRESIDENT (2) WARY TARGER	1.00	\vdash				\vdash		<u>U.</u>	0.	0.
(2) MARY JAEGER	1.00	1						0.	0.	0.
SECRETARY (3) JOANNE HYNES	1.00	\vdash	 	 		-				
TREASURER	1.00							0.	0.	0.
(4) JUDY JOHNSON	1.00	厂								
BOARD MEMBER		ļ		<u> </u>		<u> </u>	<u> </u>	0.	0.	0.
(5) RON BOEHI	1.00									_
BOARD MEMBER		ļ	_	<u> </u>			ļ	0.	0.	0.
(6) TED SCHERER	1.00	-								
BOARD MEMBER	1 00	\vdash			 	├		0.	0.	0.
(7) BILL LEWIS BOARD MEMBER	1.00							0.	0.	0.
				_						
	-									
		_				_				
	 	┝			_					

(A)
Name and business address
NONE

| Compensation | Compensation

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) Related or (C) Unrelated (D)
Revenue excluded from tax under (A) Total revenue exempt function business revenue revenue 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c 1d d Related organizations e Government grants (contributions) 1e All other contributions, gifts, grants, and 17,718. similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 17,718 h Total. Add lines 1a-1f . Business Code Program Service Revenue f All other program service revenue q Total. Add lines 2a-2f Investment income (including dividends, interest, and 61,706. 61,706. other similar amounts) Income from investment of tax-exempt bond proceeds 4 5 Royalties (ı) Real (II) Personal 6 a Gross rents **b** Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 **b** Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less. direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a d All other revenue .. e Total. Add lines 11a-11d 61,706. 79,424. Total revenue. See instructions. 332009 10-29-13 Form 990 (2013)

Form 990 (2013) CENTRAL LUTHERAN FOUNDATION Part IX | Statement of Functional Expenses

Sect	on 501(c)(3) and 501(c)(4) organizations must com			mplete column (A).	
	Check if Schedule O contains a respon		this Part IX	··· (C)	(D)
	not include amounts reported on lines 6b, 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 United States. See Part IV, line 21	60,700.	60,700.		
2	Grants and other assistance to individuals in		44 -00		
	the United States. See Part IV, line 22	11,500.	11,500.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members	-			
5	Compensation of current officers, directors,				
	trustees, and key employees				
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				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	<u> </u>				
С	Accounting				
d	Lobbying	-	<u> </u>		
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	• -				
	column (A) amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	- 1			<u>u</u>
22	Depreciation, depletion, and amortization				
23	Insurance				
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 0.) INVESTMENT EXPENSES	3,825.		3,825.	
		1,020.		1,020.	
	LICENSE AND FEES	1,040.		1,020.	
C					
d	All other avecage				
	All other expenses	77,045.	72,200.	4,845.	0.
25 26	Joint costs Complete this line only if the organization	11,0=3.	, 2, 200		
26	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here from it following SOP 98-2 (ASC 958-720)				
	THORIOWING SOF 88-2 (MSC 838-720)				

Form 990 (2013)
Part X Balance Sheet

L		Check if Schedule O contains a response or note to any line in this Part X			
		Officer in Generalite of Contains a response of note to any line in this Fart X	(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing	191,879.	1	76,573.
	2	Savings and temporary cash investments	250,127.	2	250,000.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
	_	trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under	er		
	ļ	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributi	ing	:	
		employers and sponsoring organizations of section 501(c)(9) voluntary	-	ľ	
S		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
ĕ	8	Inventones for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less accumulated depreciation 10b		10c	
	11	Investments publicly traded securities		11	
	12	Investments other securities See Part IV, line 11	1,248,038.	12	1,529,333.
	13	Investments · program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,690,044.	16	1,855,906.
	17	Accounts payable and accrued expenses .		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to current and former officers, directors, trustees,			
Liabilities		key employees, highest compensated employees, and disqualified persons.			
iab		Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	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	<u> </u>	25	
	_26	Total liabilities. Add lines 17 through 25	0.	26	0.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and	d		
ses		complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets		27	
Bal	28	Temporarily restricted net assets		28	<u></u>
nd	29	Permanently restricted net assets		29	
2		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 🗶	J		
S OF		and complete lines 30 through 34.			_
set	30	Capital stock or trust principal, or current funds	0.	30	0.
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or equipment fund	1 690 044	31	1,855,906.
Net	32	Retained earnings, endowment, accumulated income, or other funds	1,690,044.		1,855,906.
_	33	Total net assets or fund balances	1,690,044.	33 34	1,855,906.
	<u>34</u>	Total liabilities and net assets/fund balances	1,030,044.	<u>. 54</u>	1,033,300.

	1990 (2013) CENTRAL LUTHERAN FOUNDATION	<u>93-</u>	<u>0762860</u>	Page 12
Pa	rt XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
		1	_	
1	Total revenue (must equal Part VIII, column (A), line 12)	_ 1		<u>,424.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		<u>7,045.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3		<u>2,379.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		0,044.
5	Net unrealized gains (losses) on investments	5	163	<u>3,483.</u>
6	Donated services and use of facilities	_ 6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	10	1,855	<u>5,906.</u>
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			
				Yes No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.		ļ
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a		ļ
	separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
þ	Were the organization's financial statements audited by an independent accountant?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basıs,	1 1	j
	consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,		ļ
	review, or compilation of its financial statements and selection of an independent accountant?		2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch		4 1	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Auc	lit	
	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	red aud	lit	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	
			Form 9	990 (2013)

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.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Name of the organization 93-0762860 CENTRAL LUTHERAN FOUNDATION 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 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: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 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 d Type III - Non-functionally integrated c Type III - Functionally integrated b ___ Type II 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) If the organization received a written determination from the IRS that it is a Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No 11g(i) the governing body of the supported organization? (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). h (iv) Is the organization (v) Did you notify the (vi) Is the (iii) Type of organization (vii) Amount of monetary (i) Name of supported (ii) EIN organizátion in col. in col. (i) listed in your organization in col. (described on lines 1-9 support organization (i) organized in the U.S.? (i) of your support? governing document? above or IRC section (see instructions)) Yes No Yes Yes No

Schedule A (Form 990 or 990-EZ) 2013 CENTRAL LUTHERAN FOUNDATION 93-0762860 Page 2 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)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and					,	
	membership fees received. (Do not						
	include any "unusual grants.")	7,547.	7,170.	130,515.	5,687.	17,718.	168,637.
2	Tax revenues levied for the organ-						
	ızatıon'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	7,547.	7,170.	130,515.	5,687.	17,718.	168,637.
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,	i					
	column (f)						124,620.
6	Public support. Subtract line 5 from line 4						44,017.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 4	7,547.	7,170.	130,515.	5,687.	17,718.	168,637.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	7,281.	10,617.	5,993.	40,502.	61,706.	126,099.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carned on						
10	Other income Do not include gain	· <u>-</u> -					
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10	-					294,736.
	Gross receipts from related activities,	etc (see instruction	ons)			12	
13	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	x year as a section	n 501(c)(3)	
	organization, check this box and stor	here		<u> </u>			▶□
Sec	tion C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2013 (I	ıne 6, column (f) dı	vided by line 11, c	olumn (f))		14	14.93 %
15	Public support percentage from 2012	Schedule A, Part	II, line 14			15	14.02 %
16a	33 1/3% support test - 2013. If the c	organization did no	t check the box or	line 13, and line	14 is 33 1/3% or m	nore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				▶□
b	33 1/3% support test - 2012. If the c	organization did no	t check a box on l	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	ns box
	and stop here. The organization qual						ightharpoons
17a	10% -facts-and-circumstances test	t - 2013. If the org	anızatıon did not c	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						▶ [X]
b	10% -facts-and-circumstances test					7a, and line 15 is	10% or
	more, and if the organization meets th	_					
	organization meets the "facts-and-circ						ightharpoons
18	Private foundation. If the organization						s •
						dule A (Form 990	

Schedule A (Form 990 or 990-EZ) 2013 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.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not		i			1	}
	include any "unusual grants")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7 8	Amounts included on lines 1, 2, and						
	3 received from disqualified persons					ł	
t	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					<u> </u>	
	Public support (Subtract line 7c from line 6)				<u> </u>	<u> </u>	
Se	ction B. Total Support			,			
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on					İ	ı
	securities loans, rents, royalties						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	: Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,					1	
	whether or not the business is					1	
	regularly carried on			-,			
12	Other income Do not include gain or loss from the sale of capital						
	assets (Explain in Part IV)		<u> </u>				
	Total support. (Add lines 9, 10c, 11, and 12)	L		<u> </u>	<u> </u>	l	
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a section	n 501(c)(3) organız	ation,
_	check this box and stop here	. 0					<u> </u>
	ction C. Computation of Publ					TT	
	Public support percentage for 2013 (I			olumn (t))	•	15	%
	Public support percentage from 2012 ction D. Computation of Investigation			·		16	%
	Investment income percentage for 20			ne 13 column (f))		17	%
	Investment income percentage from 2			10 10, 0010/1111 (1))		18	%
	33 1/3% support tests - 2013. If the			on line 14, and line	e 15 is more than ?		
130	more than 33 1/3%, check this box a						▶□
h	33 1/3% support tests - 2012. If the						and
	line 18 is not more than 33 1/3%, che						▶ □
20	Private foundation. If the organization		=				

Schedule A	(Form 990 or 990-EZ) 2013 CENTI	RAL LUTHERAN	FOUNDATION	<u>93-0762860</u> F	Page
Part IV	Supplemental Information.	Provide the explanations	required by Part II, line 10, F	Part II, line 17a or 17b, and Part III, line 12	2.
	Also complete this part for any additional statement of the complete this part for any additional statement of the complete the complete this part for any additional statement of the complete this part for any additional statement of the complete this part for any additional statement of the complete this part for any additional statement of the complete this part for any additional statement of the complete this part for any additional statement of the complete this part for any additional statement of the complete this part for any additional statement of the complete this part for any additional statement of the complete the comple	tional information (See in	structions).		
			'n		
					
					
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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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

Nam	e of the organization CENTRAL LUTHERAN F	OUNDATION	Employer identification number 93-0762860
Pa			
<u> </u>	organization answered "Yes" to Form 990, Part IV, line		A Adodanto. Complete ii the
		(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
J	are the organization's property, subject to the organization's	•	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be us	ed only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose co	nferring
	Impermissible private benefit?	<u> </u>	Yes No
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, Par	t IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e		ncally important land area
	Protection of natural habitat	Preservation of a certifie	• •
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied 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
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
	Number of conservation easements on a certified historic str	ucture included in (a)	2c
	Number of conservation easements included in (c) acquired a		
u	listed in the National Register	and of 17700, and not on a motorio structure	2d
3	Number of conservation easements modified, transferred, rel	leased extinguished or terminated by the o	<u> </u>
Ū	year ▶	isassa, skiingaishee, er terrimassa sy trie er	gamzation damig the tax
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per	· · · · · · · · · · · · · · · · · · ·	
	violations, and enforcement of the conservation easements in		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	·	ng the year
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above		
_	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expense st	atement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes the	organization's accounting for
	conservation easements.		
Pa	rt III Organizations Maintaining Collections o	f Art, Historical Treasures, or Oth	er 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 (AS	SC 958), not to report in its revenue statemen	nt and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	nibition, education, or research in furtherance	e of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	bes these items	
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement ar	nd balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		
	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 treation	asures, or other similar assets for financial o	
_	the following amounts required to be reported under SFAS 1		••
а	Revenues included in Form 990, Part VIII, line 1	, , , , , , , , , , , , , , , , , , , ,	> \$
	Assets included in Form 990, Part X		> \$
-	•	•	

		LUTHERAN								Page 2
Pa	rt III Organizations Maintaining C	Collections of A	rt, His	torical Tr	easures, or	Other	Simil	ar Asse	ts (contin	ued)
3	Using the organization's acquisition, accessi	ion, and other record	ls, chec	k any of the	following that ar	e a sign	ıfıcant	use of its	collection	ı ıtems
	(check all that apply)									
а	Public exhibition	c	ı <u> </u>	Loan or exc	hange programs	3				
b	Scholarly research	ϵ	• 🗀	Other						
C	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how tl	hey further tl	he organization':	s exemp	t purpo	ose in Par	t XIII	
5	During the year, did the organization solicit of	or receive donations	of art, h	istorical trea	sures, or other s	ımılar as	ssets		_	
	to be sold to raise funds rather than to be ma								Yes	No
Pai	rt IV Escrow and Custodial Arran		ete if the	organizatio	n answered "Ye	s" to Fo	rm 990	, Part IV, I	ine 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.								
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	s or other asset	s not inc	cluded		7	
	on Form 990, Part X?	•						L	」 Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table:						
									Amount	
С	Beginning balance .	•					1c			
d	Additions during the year	-		••	-		1d			
е	Distributions during the year						_1e			
f	Ending balance						1f			
	Did the organization include an amount on F				<u>.</u>				」Yes	├─ No
Par	If "Yes," explain the arrangement in Part XIII									
Гаі	Tt V Endowment Funds. Complete r						Theres			
	On a second formal large	(a) Current year	(b) ⊢	Prior year	(c) Two years b	ack (a)	rnree y	ears back	(e) Four	years back
1a	Beginning of year balance					-+				
b	Contributions									· -
C	Net investment earnings, gains, and losses									
d	Grants or scholarships					_				
е	Other expenditures for facilities									
	and programs									
ı _	Administrative expenses									
g	End of year balance	rent veer and belone	o (lino 1	a solumn (s	\\ bold as					
2	Provide the estimated percentage of the curl Board designated or quasi-endowment	rent year end balanc	%	y, coluitiii (a	i)) Held as.					
a b	Permanent endowment	%	70							
	Temporarily restricted endowment	% %								
С	The percentages in lines 2a, 2b, and 2c shou									
22	Are there endowment funds not in the posse		ation the	at are held a	nd administered	for the	organiz	ration		
Ja	by.	333011 Of the organiz	allon tin	at are riole a	na administrica	101 1110	organiz	ation	ſ	Yes No
	(i) unrelated organizations								3a(i)	163 140
	(ii) related organizations	•		•					3a(ii)	
h	If "Yes" to 3a(ii), are the related organizations	s listed as required c	n Scher	dule B?					3b	
4	Describe in Part XIII the intended uses of the	•			-				_ <u> </u>	
	t VI Land, Buildings, and Equipm		, will cit	idildo.	·					
	Complete if the organization answere		. Part IV	/, line 11a. S	ee Form 990, Pa	ırt X, lıne	10			
	Description of property	(a) Cost or o				(c) Accu		d T	(d) Book	value
	accompliant of property	basis (investr		basis			ciation		,	-
1a	Land		-						_	
b	Buildings					_				
C	Leasehold improvements									
ď	Equipment									
	Other									
	A 111		V andrie	nn (P) line 1	0(a))					0

Part VII Investments - Other Securities.			30 0702000 . ago
Complete if the organization answered "Yes" t	o Form 990, Part IV, line	e 11b See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or	end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests .			
(3) Other			
(A) BENEFICIAL INTEREST IN			
(B) NET ASSETS OF OCF	461,777	• END-OF-YEAR MARK	ET VALUE
(C) ELCA ENDOWMENT FUND			·
(D) POOLED TRUST	490,475	• END-OF-YEAR MARK	ET VALUE
(E) VANGUARD WELLINGTON FUND			
(F) ADMIRAL	117,269	• END-OF-YEAR MARK	ET VALUE
(G) VANGUARD DIVIDEND YLD IDX			
(H) INV	326,935		ET VALUE
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	1,529,333	• <u> </u>	·
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" t			
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or	end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" t		11d. See Form 990, Part X, line 15	
(a) [Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15)		<u> </u>
Part X Other Liabilities.		44 . 44(0 . 5	0.5
Complete if the organization answered "Yes" t	o Form 990, Part IV, line	(b) Book value	25
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)		-4-444

2. Liability for uncertain tax positions. In Part XIII, 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). Check here if the text of the footnote has been provided in Part XIII

93-0762860 Page 5 Schedule D (Form 990) CENTRAL LUTHERAN FOUNDATION Part XIII Supplemental Information (continued) Part VII Investments - Other Securities. See Form 990, Part X, line 12. (a) Description of security or category (c) Method of valuation (b) Book value (including name of security) Cost or end-of-year market value VANGUARD EQUITY INCOME FUND ADM 132,877. FMV

SCHEDULEI (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Department of the Treasury Internal Revenue Service	temodel 1	► Attach to Form 990.	► Attach to Form 990.	m 990. : inetructions is a	Parol/form	Co	Open to Public Inspection
Name of the organization		מון מחסתו סבוובכתחום					Employer identification number
CENTRAL		FOUNDATION					93-0762860
Part I General Information on Grants and Assistance	s and Assistance						
1 Does the organization maintain records to substantiate the amount of	ds to substantiate th	e amount of the grants	or assistance, the	grantees' eligibility	/ for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
	ssistance?	to control of the control	Sound I out on other A	, , , , , , , , , , , , , , , , , , ,			X Yes
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	to Governments an	d Organizations in the	e United States. C	omplete if the orga	anization answered "\	Yes" to Form 990, Part IV	/, line 21, for any
recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	an \$5,000 Part II car	n be duplicated if addit	ional space is neec	led			
1 (a) Name and address of organization or government	(a) FIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTRAL LUTHERAN CHURCH 1857 POTTER ST EUGENE, OR 97403		501(C)(3)	21,700.	0			
		501(¢)(3)	11,000.	*0			
EUGENE MISSION 1542 W 1ST AVE EUGENE OR 97402		501(C)(3)	. 000 S	o			
<u> </u>							
 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table 	 and government on the line 	rganizations listed in the 1 table	ne line 1 table				3.
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	iice, see the Instruc	tions for Form 990.					Schedule I (Form 990) (2013)

332101 10-29-13

Page 2 (f) Description of non-cash assistance 93-0762860 (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. Part IV | Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information EXPLANATION: GRANTS ARE ONLY MADE TO LOCAL ORGANIZATIONS THAT ARE PUBLIC CHARITIES AND WELL KNOWN TO THE BOARD AND TO NATIONAL AND INTERNATIONAL ORGANIZATIONS THAT ARE ASSOCIATED WITH THE LUTHERAN CHURCH AND MAKE (d) Amount of non-cash assistance 0 11,500 (c) Amount of cash grant INFORMATION ON THEIR ACTIVITIES PUBLICLY AVAILABLE CENTRAL LUTHERAN FOUNDATION (b) Number of recipients (a) Type of grant or assistance Schedule I (Form 990) (2013) LINE SCHOLARSHIPS PART I, Part III

• '•

SCHEDULE O (Form 990 or 990-EZ)

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.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number 93-0762860 CENTRAL LUTHERAN FOUNDATION

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
FOUNDATION FUNDS MISSIONS, PROVIDES SCHOLARSHIPS AND MAKES GRANTS TO
OTHER CHARITABLE ORGANIZATIONS.
FORM 990, PART VI, SECTION B, LINE 11:
EXPLANATION: FORM 990 IS REVIEWED BY THE PRESIDENT AND/OR TREASURER BEFORE
SIGNING AND FILING.
FORM 990, PART VI, SECTION C, LINE 18:
EXPLANATION: THE ORGANIZATION MAKES ITS FORM 1023 AND FORM 990 AVAILABLE
FOR INSPECTION BY THE PUBLIC ON REQUEST AT CENTRAL LUTHERAN CHURCH.
FORM 990, PART VI, SECTION C, LINE 19:
EXPLANATION: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, POLICIES AND
FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC ON REQUEST AT CENTRAL LUTHERAN
CHURCH.