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

2013 Open to Public Inspection

Yes

No Form **990** (2013)

OMB No 1545-0047

For the 2013 calendar year, or tax year beginning 07/01/13, and ending 06/30/14C Name of organization Employer identification number THE LUTHERAN SCHOLARSHIP GRANTING Check if applicable ORGANIZATION OF INDIANA, INC. Address change Doing Business As 45-4856406 Name change Number and street (or P O box if mail is not delivered to street address) Room/suite Telephone number Initial return 260-203-4509 1601 SAINT JOE RIVER DRIVE Terminated City or town, state or province, country, and ZIP or foreign postal code FORT WAYNE 46805 ,468,894 Amended return G Gross receipts \$ Name and address of principal officer Application pending H(a) Is this a group return for subordinates? W. RANDALL KAMMEYER SAME AS C ABOVE H(b) Are all subordinates included? If "No." attach a list (see instructions) X <u>501(c)(3)</u> 501(c) (insert no) 4947(a)(1) or 527 Tax-exempt status WWW.LUTHERANSGO.ORG Website: H(c) Group exemption number ▶ X Corporation Trust 2012 Form of organization Association Year of formation INM State of legal domicile Part I Summary 1 Briefly describe the organization's mission or most significant activities. SEE SCHEDULE O Activities & Governance 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) 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 0 5 6 Total number of volunteers (estimate if necessary) 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 7b b Net unrelated business taxable income from Form 990-T, line 34 Pnor Year Current Year 306, 648 1,468,833 8 Contributions and grants (Part VIII, line 1h) 0 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 306,654 468 894 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 089. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 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) 0 16a Professional fundraising fees (Part IX, column (A), line 11e) 1,211 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 16,482 79,905 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) <u>161,682</u> 169,008 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 144,972 299, 886 19 Revenue less expenses Subtract line 18 from line 12 Beginning of Current Year End of Year .008 20 Total assets (Part X, line 16) 148 S 83 OCT 27 2014 036 290 21 Total liabilities (Part X, line 26) 972 144 444 858 22 Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and state pents, and to the best of my knowledge and belief, it is virue, correct, and complete Declaration of preparer (officer han officer) is based on all information of which preparer has any knowledge Sign RANDALL Here PRESIDENT Type or print name and title Prepare signature Date PTIN Print/Type preparer's name Check Paid 🐣 10/2/14 self-employed BRIAN D. BOWMAN, CPA P00540295 Preparer **GAGE** SCHROEDER, LLC 35-1939627 BADEN & Firm's EtN ▶ Firm's name **Use Only** INVERNESS WAY #300 6920 POINTE FORT WAYNE IN 46804-7926 260-422-2551

May the IRS discuss this return with the preparer shown above? (see instructions)

For Paperwork Reduction Act Notice, see the separate instructions.

orm 990 (2013)	THE LUTHERAN	SCHOLARSHIP GRANTING	45-4856406	Page 2
		n Service Accomplishments	line in this Dort III	X
	The ck it Schedule O combe the organization's miss	ontains a response or note to any	line in this Part III	<u>A</u>
SEE SCH				
2 Did the orga	inization undertake any sigi	nificant program services during the year wh	nich were not listed on the	
-	990 or 990-EZ?	. Och adala O		Yes X No
	scribe these new services of enization cease conducting.	or make significant changes in how it condi	ucts, any program	
services?	J.	5	, ,, ,	Yes X No
	scribe these changes on So		lassest measures convene	managed by
		ervice accomplishments for each of its three e)(4) organizations are required to report the		
•		, for each program service reported		
		1 000 100	1 000 100	
4a (Code) (Expenses \$	1,089,103 including grants of TS TO RAISE FUNDS FRO		
		FUNDS TO ALL ELIGIBLE		
INDIANA	LUTHERAN SCH	OOL OF THEIR CHOICE.	THE EFFORTS OF	THE ORGANIZATION
SUPPORT	ENROLLMENT G	ROWTH AND CHRISTIAN C	OUTREACH TO FAM	ILIES.
4b (Code.) (Expenses \$	including grants of	\$) (Revenue \$
4c (Code) (Expenses \$	including grants of	•) (Revenue \$
40 (Code) (Expenses \$	including grants of	Ψ	, (Nevertice 4)
4d Other progr	ram services. (Describe in S	Schedule O)		* * *
(Expenses		including grants of \$) (Revenue \$)
	am service expenses >	1,089,103		Form 990 (2013)
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Part IV (Chèckli	st of Required	Schedules	
orm 990 (2013)	\mathtt{THE}	LUTHERAN	SCHOLARSHIP	GRANTING

	· ·		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		<u>X</u>
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, 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? 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			
а	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
þ	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
С	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
	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 and XII	12a	Χ	
þ	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 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
	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			17
	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 other assistance to or			٠,,
	for any foreign organization? 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 other			37
	assistance to or for foreign individuals? 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	4-		17
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	_17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	اسرا		17
	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?	ا ۔ م		4,7
	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		<u>X</u>
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	<u>No</u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	. [
	, , ,	21		<u>X</u>
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States	_	.,	
		22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		ŀ	
	organization's current and former officers, directors, trustees, key employees, and highest compensated	,,		X
04-		23		
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			
		24a		Χ
b		24b		Λ
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
·		24c		
d		24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	1	\neg	
		25a │		Χ
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?	1		
		25b		Χ
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		İ	
	disqualified persons? If so, complete Schedule L, Part II	26		Χ
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,		I	
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):		1	
а	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		l	
		28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)		İ	17
	- · · · · · · · · · · · · · · · · · · ·	28c		X
29		29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	I		v
24		30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	" 		
J_		32	İ	Χ
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	-		
		33		Χ
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
		34_		Χ
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	5a		X
b	If "Yes" to line 35a, 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	5b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable	- 1		
	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,		- 1	
		37		X
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	X	

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Pa	art V Statements Regarding Other IRS Fillings and Tax Compliance				
	Check if Schedule O contains a response or note to any line in this Part V				
		1 0		Yes	No
_	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable				ĺ
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Little organization comply with healths with healths railed for reportable payments to wonder and	21 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		1c		Х
20	reportable gaming (gambling) winnings to prize winners?	1	16	I	
za	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	0			ĺ
b	Statements, filed for the calendar year ending with or within the year covered by this return 2a If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b		İ
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		20		
3a			3a		Х
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		,			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial				ĺ
	account)?		4a		Х
ь					
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accoun	ts			ĺ
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		Х
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				ĺ
	organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	•	1			
_	gifts were not tax deductible?		6b	ļļ	
7	Organizations that may receive deductible contributions under section 170(c).				Ė
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		~_	1	Х
	and services provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided?		7a 7b	\vdash	
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		70		
·	required to file Form 8282?		7c		Х
d	If "Yes," Indicate the number of Forms 8282 filed during the year	1			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e	1	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899	as required?	7g		Χ
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file	a Form 1098-C?	7h		Χ
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting				ĺ
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring				ĺ
	organization, have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.			1	Ė
а	Did the organization make any taxable distributions under section 4966?		9a	\longrightarrow	
ь	Did the organization make a distribution to a donor, donor advisor, or related person?		9b	-	
10	Section 501(c)(7) organizations. Enter:	_1			
a	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990. Part VIII, line 12, for public use of club facilities 10	"T			Ė
b 11		91			Ė
11 a	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11:	ا			Ė
b	Gross income from other sources (Do not net amounts due or paid to other sources				Ė
-	against amounts due or received from them)	b			į
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	· · · · · · · · · · · · · · · · · · ·	12a	ıŧ	<i>:</i> }
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12				
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				į
	the organization is licensed to issue qualified health plans	b			į
С	Enter the amount of reserves on hand				<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	ļ	14a		_X_
b_	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		14b		
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45-4856406

Form 990 (2013) THE LUTHERAN SCHOLARSHIP GRANTING

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·	, 990 (2013) THE LUTHERAN SCHOLARSHIP GRANTING 45-4856406			age 6
	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and	for a "N		aye (
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion 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 5			
	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	1		
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 5			
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		Χ
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Χ
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		Χ
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	1		
а	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		Χ
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co	ode)		
			Yes	No
0a	Did the organization have local chapters, branches, or affiliates?	10a		<u>X</u>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	1 '		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
1a	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.			
2a	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 use to conflicts?	12b	X	
С	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	
3	Did the organization have a written whistleblower policy?	13		_X_
4	Did the organization have a written document retention and destruction policy?	14	Χ	
5	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		Χ
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
6a	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		
ec.	tion C. Disclosure			
7	List the states with which a copy of this Form 990 is required to be filed ▶ IN			
8	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 X Upon request Other (explain in Schedule O)			
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			

1601 SAINT JOE RIVER DR.

IN 46805

FORT WAYNE

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financial statements available to the public during the tax year.

organization ► ERIC TRAUNER

State the name, physical address, and telephone number of the person who possesses the books and records of the

Form 990 (2013) THE LUTHERAN SCHOLARSHIP GRANTING

45-4856406

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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

X

- 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.

[X] 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 (list any	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) CHRIS GOEGLEIN	1 00									
	1.00	,,		,					_	0
VICE PRESIDENT	0.00	X	├—	Х	-	ļ		0	0	0
(2) MARCIA HAAFF	1.00		1							
DIRECTOR	0.00	x						О	0	0
(3) W. RANDALL KAMME		 ^	\vdash	 	_	 				<u> </u>
(), W. Tulle Tulle	1.00]							
PRESIDENT	0.00	X		Х				O	0	0
(4) BETH KITSON										
	1.00									
DIRECTOR	0.00	X		_		<u> </u>		0	0	0
(5) ERIC TRAUNER			İ							
	1.00	l								
TREASURER/SECRETARY	0.00	X	<u> </u>	Х	_		_	0	0	0
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
DAA										Form 990 (2012)

DAA

	990 (2013) THE LUTHE										Page	e 8
Pa		, Directors, Tru	stee:	s, Ke	у Е	mplo	yees	s, ar	nd Highest Compensated	Employees (continued)		
	(A) ` Name and title					erson (directo	than o	an 90)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the	
		related organizations below dotted line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations	
(12)	-											
(13)		_					. <u>-</u>					
(14)												
(15)												
(16)												
(17)												
(18)											,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(19)												
1b	Sub-total			l	l	<u> </u>		<u> </u>				<u> </u>
d	Total from continuation shee Total (add lines 1b and 1c)	ets to Part VII, S	ectio	on A							 	_
2	Total number of individuals (increportable compensation from			to th	ose	liste	d abo	ve)	who received more than \$10	00,000 in	Voc. N	_
3	Did the organization list any for employee on line 1a? If "Yes,"	complete Schedu	ıle J	for s	uch i	ındıv	idual				Yes N	
4	For any individual listed on line organization and related organ individual									n the	4	<u>ζ</u>
5 Soct	Did any person listed on line 1a for services rendered to the org ion B. Independent Contracto	ganization? If "Ye								lividual	5 >	<u> </u>
1	Complete this table for your five compensation from the organization	e highest compei ation Report coi							ir year ending with or within t	he organization's tax year.		
	Name and	(A) business address							Descript	(B) on of services	(C) Compensation	_
										 		_
				-		.,				. 1, 1, 2, 7, .		
	Total number of independent c	ontractors (inclus	lina l	out n	ot lin	nıted	to th	080	listed above) who	. 		_
DAA	received more than \$100,000 c									00	Form 990 (20	 013)

		_ '_ Check	_if Schedule C	contains a	a response	or note to any line	in this Part VIII		
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
S S	1a	Federated carr	nnaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership di	1	1b					
ច្ខ			1			1			
ξĒ		Fundraising ev		1c		-			
<u>ड</u> ेंड		Related organi		1d					
έĒ	е	Government grants	(contributions)	1e					
즐입	f	All other contribution		ļ					
캶		and similar amounts	not included above		1,468,833				
들임	g	Noncash contribution	ns included in lines 1a-1	f \$	3,978				
ଞ୍ଚି	h	Total. Add line	s 1a–1f		•	1,468,833			
9		-			Busn. Code				
ᄛ	2a					1			
اچ	b								
Ž									
န္	đ				-				
ra Ta	е								
Program Service Revenue	f		am service reven	ue	L			<u> </u>	
_	g	Total. Add line	s 2a-2f		> _			r	
	3	Investment inc	ome (including di	ividends, ınter	est,				
		and other simil	lar amounts)		>	61		_	61
	4	Income from in	nvestment of tax-	exempt bond	proceeds 🕨				
	5	Royalties			•				
		·	(ı) Real		ii) Personal				·
	6a	Gross rents				1			
	b	Less rental exps				1			
		•				1			
	C	Rental inc or (loss)				·			
	d 7a	Net rental inco Gross amount from			(v) Other				
		sales of assets	(i) Secunties		(II) Other				
		other than inventory		- 		4			
	b	Less cost or other							
l		basıs & sales exps							
- 1	C	Gain or (loss)							
I	d	Net gain or (los	ss)						
_	8a	Gross income fro	om fundraising even	ts					
ng		(not including \$	_	1					
Š			eported on line 1c).						
ا يخ		See Part IV, line	-	a					
Other Reven	h	Less: direct ex		<u></u>	_	1			
ŏ			(loss) from fundr			1			•
			om gaming activities						
	Ja								
		See Part IV, line		a		1			
		Less direct ex		b		•		=	
			(loss) from gamı	ng acti <u>vities</u>	<u> </u>				
	10a	Gross sales of	finventory, less						
		returns and all	owances	a					
	b	Less cost of g	oods sold	b					
	С	Net income or	(loss) from sales	of inventory	•				
			cellaneous Revenue		Busn. Code				
	11a]			
	b					1			
	C							-	
	-	All other rever							
	d	All other reven							
		Total. Add line		_		1 460 004			<u></u>
	12	i otal revenue	e. See instructions	S	▶	1,468,894	0	0	61

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) Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses (B) Program service expenses (D) Fundraising Do not include amounts reported on lines 6b. Management and 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in 1,089,103 1,089,103 the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members 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) Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes Fees for services (non-employees): Management 2,420 2,420 Legal 9,285 9,285 Accounting C Lobbying Professional fundraising services See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 48,000 46,789 1,211 8,249 12 Advertising and promotion 13 Office expenses 14 Information technology 15 Royalties 16 Occupancy 17 Travel 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 Depreciation, depletion, and amortization 22 750 750 23 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.) 9,188 9,188 BANK FEES 2,013 2,013 MISCELLANEOUS b C d All other expenses 1,169,008 1,089,103 78,694 Total functional expenses. Add lines 1 through 24e 25 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 ▶ following SOP 98-2 (ASC 958-720)

Form 990 (2013)

Balance Sheet Part X Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 152,008 1 439,121 Cash-non-interest bearing 2 2 Savings and temporary cash investments 3 6.027 Pledges and grants receivable, net 4 Accounts receivable, net 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 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 6 organizations (see instructions) Complete Part II of Schedule L Notes and loans receivable, net 7 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 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 12 Investments—other securities See Part IV, line 11 Investments-program-related. See Part IV, line 11 13 13 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 152,008 445 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 Accounts payable and accrued expenses 6,136 17 900 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other 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 23 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 25 of Schedule D 7,036 290 26 Total liabilities. Add lines 17 through 25 X and Organizations that follow SFAS 117 (ASC 958), check here ▶ **Fund Balances** complete lines 27 through 29, and lines 33 and 34. 19,564 27 Unrestricted net assets 125,408 28 400, 28 Temporarily restricted net assets 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and 5 complete lines 30 through 34. Net Assets 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 444,858 144,972 33 33 Total net assets or fund balances 445,148 152,008 34 Total liabilities and net assets/fund balances

om	1990 (2013) THE LUTHERAN SCHOLARSHIP GRANTING 45-4856406			Pa	ge 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	Total revenue (must equal Part VIII, column (A), line 12)	1	1,46								
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,16								
3	Revenue less expenses. Subtract line 2 from line 1	3	29	99,	<u>886</u>						
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	14	144,972							
5	Net unrealized gains (losses) on investments	5									
6	Donated services and use of facilities 6										
7	Investment expenses	7									
8	Pnor period adjustments	8									
9	Other changes in net assets or fund balances (explain in Schedule O)	9									
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line										
	33, column (B))	10	4 4	14,	858						
Pa	art 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										
	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?										
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or										
	reviewed on a separate basis, consolidated basis, or both:										
	Separate basis Consolidated basis Both consolidated and separate basis				ĺ						
b	Were the organization's financial statements audited by an independent accountant?		2b	Χ							
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a										
	separate basis, consolidated basis, or both.				ĺ						
	X 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		1 1								
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Χ							
	If the organization changed either its oversight process or selection process during the tax year, explain in										
	Schedule O.				ĺ						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in										
	the Single Audıt 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								
			Form	990	(2013)						

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

Open to Public

Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Part I

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

ORGANIZATION OF INDIANA,

Employer Identification number 45-4856406

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). 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). X 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.) 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. c Type III-Functionally integrated Type II Type III-Non-functionally integrated 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 I, 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? (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(i) (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) (iv) Is the organization (vi) Is the (i) Name of supported (ii) EIN (iiI) Type of organization (v) Did you notify (vii) Amount of monetary the organization in ianization in col organization (described on lines 1-9 in col (i) listed in your support col (i) of your (i) organized in the above or IRC section governing document? support? US? (see instructions)) Yes Yes Yes No Nο No (A) (B)

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

Schedule A (Form 990 or 990-EZ) 2013

(C)

(D)

(E)

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45-4856406

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	tion A. Public Support					_	
Caler	dar 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.")				311,035	1,468,833	1,779,868
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				311,035	1,468,833	1,779,868
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)						94,775
<u>6</u> Sac	Public support. Subtract line 5 from line 4. tion B. Total Support		<u>. </u>	<u> </u>	1 1		1,685,093
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	(4) 2000	(5) 2510	(0) 2011	311,035	1,468,833	1,779,868
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources				311,033	61	67
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						1,779,935
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, four	th, or fifth tax year a	as a section 501(c)(3	3)	
	organization, check this box and stop here						▶ X
<u>Sec</u>	tion C. Computation of Public Su	rt					
14	Public support percentage for 2013 (line 6,			(f))		14	
15	Public support percentage from 2012 Sche					15	%_
16a	33 1/3% support test—2013. If the organic				1/3% or more, check	k this	▶ []
	box and stop here. The organization qualif						▶ [
b	33 1/3% support test—2012. If the organi			· ·	is 33 1/3% or more,		
47-	check this box and stop here . The organization	•		•	40b		
17a	10%-facts-and-circumstances test—201	•					
	10% or more, and if the organization meets Part IV how the organization meets the "fac		•		•		
	· · ·	is-and-circumstand	ces test The orga	nization qualifies as	s a publicly supporter	u	▶ □
b	organization 10%-facts-and-circumstances test—201	2 If the organization	on did not chack a	hov on line 13 16a	16b or 17a and lin	10	
J	15 is 10% or more, and if the organization r						
	Explain in Part IV how the organization mee					v	
	supported organization	no the lacto-and-c	Jamotanoes test	. The organization	quannos as a publici	,	▶ □
18	Private foundation. If the organization did	not check a box or	n line 13, 16a, 16b	17a, or 17b. check	this box and see		٠ ا
	instructions						▶ 🗌

45-4856406

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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.)

Sec	tion A. Public Support					<u></u>		
Caler	dar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201	3	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")							
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							
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							
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						- 1	
500	line 6) tion B. Total Support	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	1	
	idar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	<u>. </u>	(f) Total
9	Amounts from line 6	(2) 2000	(2) 2010	(0) 2011	(-,	(0, 20).		(1) 10141
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						j	
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
С	Add lines 10a and 10b	-				:		
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						į	
13	Total support. (Add lines 9, 10c, 11, and 12)							
14	First five years. If the Form 990 is for the	organization's first,	second, third, fourt	h, or fifth tax year a	as a section 501(c)	(3)		
	organization, check this box and stop here							<u>▶ </u>
	tion C. Computation of Public Su						1	
15	Public support percentage for 2013 (line 8,	• • •	•	(f))			15	<u>%</u>
16 Soc	Public support percentage from 2012 Sche tion D. Computation of Investme						16 [%_
<u>3ec</u> 17			-	edump (fl)			17	~~~
18	Investment income percentage for 2013 (liii Investment income percentage from 2012)		=	અહાાાા (1 <i>))</i>		ŀ	17 18	——————————————————————————————————————
19a	33 1/3% support tests—2013. If the organ			l4, and line 15 is m	ore than 33 1/3%	and line		
	17 is not more than 33 1/3%, check this bo							▶ □
b	33 1/3% support tests—2012. If the organ			· · · · · · · · · · · · · · · · · · ·	•			
	line 18 is not more than 33 1/3%, check this							▶ []
20	Private foundation. If the organization did	not check a box or	n line 14, 19a, or 19	b, check this box a	ind see instructions	s		▶ □

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Schedule A (Form 990 or 990-EZ) 2013 THE LUTHERAN SCHOLARSHIP GRANTING 45-4856406

Supplemental Information. 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).

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.qov/form990

OMB No 1545-0047

Open to Public Inspection

	of the organization		Employer	denuncation number	
	HE LUTHERAN SCHOLARSHIP GRANTING	45-4856406			
-	RGANIZATION OF INDIANA, INC. ## Organizations Maintaining Donor Advised Fund	do or Other Similar Funds or As			
T #	Purple to the complete of the organization answered "Yes" to Fo	rm 990 Part IV line 6	Counts	•	
	Complete if the organization answered Tes to re	(a) Donor advised funds	0) Funds and other accounts	
1	Total number at end of year	(a) bollor advised latites		y r and and other decounts	
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	e assets held in donor advised			
	funds are the organization's property, subject to the organization's exclusive			Yes No	
6	Did the organization inform all grantees, donors, and donor advisors in wnt				
-	only for charitable purposes and not for the benefit of the donor or donor ac				
	conferring impermissible private benefit?			Yes No	
₽ø	rt II Conservation Easements.				
	Complete if the organization answered "Yes" to Fo	rm 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)	Preservation of an historically impo	rtant land	area	
	Protection of natural habitat	Preservation of a certified historic s	tructure		
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualified conservation	ion contribution in the form of a conservation	on		
	easement on the last day of the tax year.			Held at the End of the Tax Year	
а	Total number of conservation easements		2a	<u> </u>	
b	Total acreage restricted by conservation easements		2b		
C	Number of conservation easements on a certified historic structure include	d 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, exting	uished, or terminated by the organization d	during the		
	tax year ▶				
4	Number of states where property subject to conservation easement is local	ted ►			
5	Does the organization have a written policy regarding the periodic monitori	ng, 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 cons * \bar{\text{\bar{\text{\tiny{\text{\tiny{\text{\texi\text{\tetx{\text{\tetx{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\texi{\text{\text{\text{\texi}\text{\texi{\texi{\texi}\text{\texit}\texit{\text{\texit{\texi}\text{\text{\texi}\text{\texi}\	servation easements during the year			
8	Does each conservation easement reported on line 2(d) above satisfy the	requirements of saction 170/h)/4)/P)			
ŭ	(i) and section 170(h)(4)(B)(ii)?	requirements of section 170(ff)(4)(b)		Yes No	
9	In Part XIII, describe how the organization reports conservation easements	s in its revenue and expense statement, an	ıd		
•	balance sheet, and include, if applicable, the text of the footnote to the organization				
	organization's accounting for conservation easements				
Pa	計劃 Organizations Maintaining Collections of Art, H	istorical Treasures, or Other Si	milar A	ssets.	
	Complete if the organization answered "Yes" to Fo	rm 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 balan	ce sheet		
	works of art, historical treasures, or other similar assets held for public exh	ibition, education, or research in furtherand	ce of		
	public service, provide, in Part XIII, the text of the footnote to its financial st	tatements that describes these items			
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to rep	port in its revenue statement and balance s	sheet		
	works of art, historical treasures, or other similar assets held for public exh	ibition, education, or research in furtherand	ce 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 oth	er sımılar assets for financial gain, provide	the		
	following amounts required to be reported under SFAS 116 (ASC 958) rela	iting to these items:			
а	Revenues included in Form 990, Part VIII, line 1		>	\$	
b	Assets included in Form 990, Part X		•	\$	

Sche	edule D (Form 990) 2013 THE LUTH	IERAN SCHOLA	ARSHIP (GRANT:	ING	45-4	8564	06	Page 2	
Pa	ert III Organizations Maintaini	ng Collections of	Art, Histor	rical Tre	asures, c	or Other	Simila	ar Assets		
3	Using the organization's acquisition, access collection items (check all that apply).	ion, and other records,	check any of	the followir	ng that are a	significan	t use of	its		
а	Public exhibition	d 🗍	Loan or exch	ange progra	ams					
b	Scholarly research	e 🗍	Other							
С	Preservation for future generations	_								
4	Provide a description of the organization's of	ollections and explain h	now they furth	er the orga	nızation's ex	kempt pur	ose in P	art		
	XIII	•	•	Ū						
5	During the year, did the organization solicit	or receive donations of	art, historical	treasures,	or other sim	ıılar				
	assets to be sold to raise funds rather than								Yes No	
Pa	art IV Escrow and Custodial A	rrangements.								
	Complete if the organization	on answered "Yes	to Form 9	90, Part	IV, line 9,	or repo	rted ar	amount o	n Form	
	990, Part X, line 21.									
1a	Is the organization an agent, trustee, custoo	lian or other intermedia	ry for contribu	tions or oth	ner assets n	ot				
	included on Form 990, Part X?								Yes No	
b	If "Yes," explain the arrangement in Part XII	and complete the folio	wing table.	able.						
									Amount	
С	Beginning balance							1c		
d	Additions during the year							1d		
е	Distributions during the year							1e		
f	Ending balance						l	1f		
	Did the organization include an amount on l								∐ Yes ∐ No	
	If "Yes," explain the arrangement in Part XII	Check here if the exp	lanation has b	een provid	led in Part X	(111				
Pa	art ♥ Endowment Funds.	1404		00 5 4						
	Complete if the organization	T								
_		(a) Current year	(b) Pno	ryear	(c) Two yea	ırs back	(d) Thi	ree years back	(e) Four years back	
1a	,		 						<u> </u>	
b	Contributions		 						 	
С	Net investment earnings, gains, and									
	losses	· · · · · · · · · · · · · · · · · · ·	 							
a	Grants or scholarships								 	
е	Other expenditures for facilities and	1								
_	programs		<u> </u>				-			
T	Administrative expenses			•						
y	End of year balance		line to police	(a)) hald						
2 a	Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:									
a b		%								
c		%								
•	The percentages in lines 2a, 2b, and 2c sho									
3a	Are there endowment funds not in the possi		on that are he	ld and adm	unistered for	r the				
	organization by:	oodon or and organizati	on that are no						Yes No	
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organization	ns listed as required on	Schedule R?						3b	
4	Describe in Part XIII the intended uses of the									
Pa	art VI Land, Buildings, and Eq	uipment.						•		
	Complete if the organization		to Form 99	90, Part I	IV, line 11	a See l	Form 9	90, Part X	Ine 10.	
	Description of property	(a) Cost or other i	pasis	(b) Cost or oth	er basis	(c) A	ccumulated	1	(d) Book value	
		(investment)		(other)	<u> </u>	de	preciation			
1a	Land									
b	Buildings									
c	Leasehold improvements									
	Equipment									
	Other									
Total	Add lines 1a through 1e (Column (d) must	equal Form 990 Part V	Column (P)	line 10(c))						

(9)

Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶

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

DAA

Schedule D (Form 990) 2013

(8)

Part XIII Supplemental Information

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

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, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

PART X - FIN 48 FOOTNOTE

THE ORGANIZATION IS EXEMPT FROM INCOME TAXES UNDER THE PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE.

THE ACCOUNTING STANDARD WHICH PROVIDES GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS. UNDER THIS GUIDANCE, THE LUTHERAN SCHOLARSHIP GRANTING ORGANIZATION OF INDIANA, INC. MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. EXAMPLES OF TAX POSITIONS INCLUDE THE TAX-EXEMPT STATUS OF THE LUTHERAN SCHOLARSHIP GRANTING ORGANIZATION OF INDIANA, INC. AND VARIOUS POSITIONS RELATED TO THE POTENTIAL SOURCES OF UNRELATED BUSINESS TAXABLE INCOME. THE TAX BENEFITS

5

1,169,008

Part XIII Supplemental Information (continued)

RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50 PERCENT LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THERE WERE NO UNRECOGNIZED TAX BENEFITS IDENTIFIED OR RECORDED AS LIABILITIES FOR THE YEARS ENDED JUNE 30, 2014 AND 2013.

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OMB No 1545-0047 -

SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

Open to Public Inspection 2013

Employer identification number 45-4856406 ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. THE LUTHERAN SCHOLARSHIP GRANTING General Information on Grants and Assistance ORGANIZATION OF INDIANA, Name of the organization

Š Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, X Yes Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States the selection criteria used to award the grants or assistance? Part II Part

(h) Purpose of grant or assistance non-cash assistance (g) Description of (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of noncash assistance (d) Amount of cash grant (c) IRC section if applicable (p) EIN (a) Name and address of organization or government Ξ 3 ල € 9 9 9 8 6

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2013)

Page 2

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

45-4856406

THE LUTHERAN SCHOLARSHIP GRANTING

Schedule I (Form 990) (2013)

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. INCOME REQUIREMENTS THROUGH THE FOLLOWING MEANS: 1) ALL RECIPIENTS MUST IS ALSO VERIFIED FOR EACH APPLICANT. ALL SCHOLARSHIP PRIOR TO ACCEPTING PAYMENTS FROM THE LUTHERAN SGO. HOUSEHOLD SIZE AND THE ORGANIZATION VERIFIES THAT SCHOLARSHIP/GRANT RECIPIENTS MEET THE PROVIDE PROOF OF INCOME AND 2) SCHOOLS VERIFY CONTINUED ENROLLMENT PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS PAYMENTS ARE MADE DIRECTLY TO THE SCHOOL. INDIANA RESIDENCY ı PART I, LINE 2 Part Ⅳ

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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Name of the organization

THE LUTHERAN SCHOLARSHIP GRANTING

Employer Identification number

ORGANIZATION OF INDIANA, INC.

45-4856406

FORM 990 - ORGANIZATION'S MISSION

THE MISSION OF THE LUTHERAN SCHOLARSHIP GRANTING ORGANIZATION OF INDIANA, INC. IS TO RAISE FUNDS FROM INDIVIDUALS AND BUSINESSES TO PROVIDE SCHOLARSHIP FUNDS TO ALL ELIGIBLE STUDENTS WANTING TO ATTEND AN INDIANA LUTHERAN SCHOOL.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 THE 990 IS PREPARED BY OUR CPA FIRM AND A DRAFT OF THE 990 IS SENT TO ALL BOARD MEMBERS FOR REVIEW AND COMMENT. A FINAL VERSION IS APPROVED AND SUBMITTED.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY BOARD MEMBERS ARE REQUIRED TO REPORT ANY POTENTIAL CONFLICTS OF INTEREST ANNUALLY. MEMBERS AND EMPLOYEES HAVE A CONTINUING, AFFIRMATIVE DUTY TO REPORT ANY PERSONAL OWNERSHIP, INTEREST, OR OTHER RELATIONSHIP THAT MAY AFFECT THE MEMBER'S ABILITY TO EXERCISE IMPARTIAL AND ETHICAL JUDGEMENTS IN FUFILLING THEIR RESPONSIBILITIES. IF A BOARD MEMBER HAS A CONFLICT, THE MEMBER WILL ABSTAIN FROM DISCUSSION AND VOTING ON THE CONFLICTED ITEM.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL COMPENSATION IS DETERMINED AND APPROVED BY THE BOARD OF DIRECTORS. AT THE CURRENT TIME, ALL OFFICERS ARE VOLUNTEERS AND DO NOT RECEIVE COMPENSATION.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

Name of the organization

THE LUTHERAN SCHOLARSHIP GRANTING

Employer Identification number 45-4856406

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS

ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART VII - ADDITIONAL INFORMATION

ADMINISTRATIVE SERVICES ARE CONTRACTED WITH THE LUTHERAN SCHOOL

PARTNERSHIP. THE SERVICES INCLUDE SCHOLARSHIP AND FUNDRAISING MANAGEMENT,

ADVERTISING, PROMOTION AND MARKETING. THE CONTRACT AMOUNT COVERS THE

PARTNERSHIP'S COSTS.