Form 990

**Return of Organization Exempt From Income Tax** 

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

DLN: 93493042005159 OMB No 1545-0047

2017

Department of the Treasury	► Do not ent ► Informatio
Internal Revenue Service	P Informatio

-		of the Treasu enue Service	► Do not enter social security numbers on this form as it may  ► Information about Form 990 and its instructions is at <u>www</u>			C	Open to Public Inspection
A F	or th	e <b>2017</b> c	alendar year, or tax year beginning 10-01-2017 , and ending 09-30	-2018			
		applicable	C Name of organization Lutheran World Relief		D Employe	er identif	ication number
		change nange	% LAURA MORALES		13-2574	1963	
☐ Ini		-	Doing business as				
		rn/terminated			E Telephon	e numher	
		d return	Number and street (or P O box if mail is not delivered to street address) Room/suit 700 Light Street	e			
⊔ Ар	Jiicaci	ion pending	City or town, state or province, country, and ZIP or foreign postal code		(410) 2.	30-2700	
			Baltimore, MD 212303850		<b>G</b> Gross red	ceipts \$ 13	38,269,871
			F Name and address of principal officer	H(a) Is the	s a group ret	•	
			JOANN THEYS		dinates?		□Yes <b>☑</b> No
			700 Light Street Baltimore, MD 212303850	H(b) Are a	ll subordinat	es	☐ Yes ☐No
I Ta:	-exe	mpt status	<b>☑</b> 501(c)(3) □ 501(c)() <b>◄</b> (insert no) □ 4947(a)(1) or □ 527	includ		ist (see	instructions)
J W	ebsi	te:► ww			exemption		•
					ı		
<b>K</b> Forr	n of o	organization	☑ Corporation ☐ Trust ☐ Association ☐ Other ▶	L Year of form	ation 1945	M State	of legal domicile NY
Pa	131	Sumi	marv				
	1	Briefly des	cribe the organization's mission or most significant activities				
e		LWR work	s with Lutherans & Partners around the world to end Poverty, Injustice, & H	uman Sufferi	ng		
anc anc							
em							
Governance			s box $\blacktriangleright$ If the organization discontinued its operations or disposed of mo		of its net a		l 43
			of voting members of the governing body (Part VI, line 1a)		•	3	13
Activities &			of independent voting members of the governing body (Part VI, line 1b)		•	5	117
풀			nber of volunteers (estimate if necessary)		•	6	15
Act			elated business revenue from Part VIII, column (C), line 12		•	7a	0
			ated business taxable income from Form 990-T, line 34			7b	25,974
		net amer	aced business taxable mestile from 1970 1, fine 31 1 1 1 1 1	Pri	or Year	1	Current Year
_	8	Contribut	ions and grants (Part VIII, line 1h)		51,779,7	744	46,984,589
Rəvenue			service revenue (Part VIII, line 2g)		1,271,7		
ŏΛċ		_	nt income (Part VIII, column (A), lines 3, 4, and 7d )		871,5	575	2,688,988
Œ	11	Other rev	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		69,4	196	50,654
	12	Total reve	enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		53,992,5	16	50,513,284
	13	Grants ar	nd sımılar amounts paıd (Part IX, column (A), lines 1–3 )		24,264,0	39	23,724,059
	14	Benefits p	oald to or for members (Part IX, column (A), line 4)			0	0
82	15	Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5–10)		14,509,4	199	16,999,231
Expenses	16a	a Professio	nal fundraısıng fees (Part IX, column (A), line 11e)		505,3	357	516,213
kb e	b	Total fundr	aising expenses (Part IX, column (D), line 25) ▶3,195,617				
ū	17	Other exp	penses (Part IX, column (A), lines 11a-11d, 11f-24e)		12,193,2	217	12,982,520
	18	Total exp	enses Add lines 13–17 (must equal Part IX, column (A), line 25)		51,472,1	.12	54,222,023
	19	Revenue	less expenses Subtract line 18 from line 12		2,520,4		-3,708,739
Net Assets or Fund Balances				Beginning	of Current Y	ear	End of Year
set	20	Total asse	ets (Part X, line 16)		51,831,2	295	49,943,014
A B			ilities (Part X, line 26)		13,200,7		15,464,481
Fe		22 Net assets or fund balances Subtract line 21 from line 20					34,478,533
Pai			ature Block		38,630,5		,,
Under	pen	alties of po	erjury, I declare that I have examined this return, including accompanying s				
knowl any k			f, it is true, correct, and complete Declaration of preparer (other than office	er) is based o	n all informa	ation of v	vnich preparer has

**Paid** 

**Preparer** 

**Use Only** 

Sign Here Signature of officer

JOANN THEYS VP for Fin & Admin

Type or print name and title Print/Type preparer's name Marc Berger Preparer's signature Marc Berger Date PTIN P01871563 Check  $\square$  if self-employed Firm's name BDO USA LLP Firm's EIN 🕨 Firm's address ► 8401 GREENSBORO DRIVE 800 Phone no (703) 893-0600 MCLEAN, VA 22102 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) .

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

2019-02-08

Form **990** (2017)

Form	990 (2017)					Page <b>2</b>
Par	t IIII Statement	of Program Servi	ce Accomplis	hments		
	Check if Sche	edule O contains a resp	onse or note to a	any line in this Part III		🗹
1		organization's mission		•		
Affırr	ning God's Love for al	l people, we work with	Lutherans and P	artners around the wo	rld to end Poverty, Injustice and Hi	ıman Suffering
2	Did the organization	undertake any significa	ant program serv	vices during the year w	hich were not listed on	
	the prior Form 990 o	or 990-EZ?				🗌 Yes 🗹 No
	If "Yes," describe the	ese new services on Sc	hedule O			
3	Did the organization	cease conducting, or n	nake significant i	changes in how it cond	lucts, any program	
	services?					🗌 Yes 🗹 No
	If "Yes," describe the	ese changes on Schedu	le O			
4	Section 501(c)(3) ar		ons are required	to report the amount	e largest program services, as meas of grants and allocations to others,	
	(Code	) (Expenses \$	23,733,827	ıncludıng grants of \$	19,076,191 ) (Revenue \$	)
	See Additional Data					
4b	(Code	) (Expenses \$	15,563,057	ıncludıng grants of \$	3,621,837 ) (Revenue \$	789,053 )
	See Additional Data					
4c	(Code	) (Expenses \$	3,616,046	ıncludıng grants of \$	1,022,107 ) (Revenue \$	)
	See Additional Data					
4d	Other program serv	ıces (Describe in Sched	ule O)			
	(Expenses \$	2,370,072 inc	luding grants of	\$ 3,	924 ) (Revenue \$	)
4e	Total program ser	vice expenses ▶	45,283,0	02		

or X as applicable

Section 501(c)(3) organizations.

for public office? If "Yes," complete Schedule C, Part I 💆 . . . . . . . . . . . . . .

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year? 

foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . .

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

assessments, or similar amounts as defined in Revenue Procedure 98-19?

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

ın Part X, lıne 16? *If "Yes," complete Schedule D, Part IX* 😼 . . . . . . . . . . . . . . . .

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . . .

**b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . . . . . . . . . .

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🔧

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🐒

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 . . . . . . . If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX,

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

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 🛸 🔒 Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸 . . . . . . . .

Yes

Page 3

3 4 5

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12a

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Yes

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No

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No

Nο

Form **990** (2017)

Nο

No

Νo

Nο

Nο

Form 990 (2017)								
Par	IV Checklist of Required Schedules (continued)							
			Yes	No				
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No				
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b						
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes					
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No				
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	Yes					
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	Yes					
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No				
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No				
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No				
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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		No				
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?	25b		No				

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28a

28b

28c

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Yes

Yes

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Yes

Yes

Form **990** (2017)

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Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . 🥞

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . . Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . .

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

instructions for applicable filing thresholds, conditions, and exceptions)

	t V Statements Regarding Other IRS Filings and Tax Compliance			Page 2
Par				<b>✓</b>
	Check if Schedule O contains a response or note to any line in this Part V	•	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable   1a   62			- 1.5
	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	4.	V	
3-	(gambling) winnings to prize winners?	1c	Yes	
za	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	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	F.		
6-	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	5c 6a		No
	solicit any contributions that were not tax deductible as charitable contributions?	Od		INO
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	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 to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	<b>–</b>		110
u	The less, indicate the number of forms 6262 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	_		NI -
£	Did the organization during the year, hav promiting directly or indirectly on a personal honefit contract?	7e 7f		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	/1		No
y	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			
0~	Did the sponsoring organization make any taxable distributions under section 4966?	8 9a		
	Did the sponsoring organization make any taxable distributions under section 49667	9a 9b		
10	Section 501(c)(7) organizations. Enter	20		
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	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		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		F	orm 99	<b>0</b> (2017

Form 990 (2017)														ı	Page
<b>Part VI Governance, Management, and Disclosure</b> For each "Yes" response to 8a, 8b, or 10b below, describe the circumstances, processes, or changes	lines in Sci	2 t hed	hrou ule C	igh : D Si	7b b ee in	elov stru	v, ar ictio	nd fo	or a	"No'	" res	spon	se to	line	25
Check if Schedule O contains a response or note to any line in this Part V															✓
Section A. Governing Body and Management															

	Check if Schedule O contains a response or note to any line in this Part VI			✓
Se	ction 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  13			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent  1b 13			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
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		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7</b> b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	<b>8</b> a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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	Yes	
b	Other officers or key employees of the organization	15b		No
	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		No
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		
Se	ction C. Disclosure			
17 18	List the States with which a copy of this Form 990 is required to be filed  AL , AK , AZ , AR , CA , CO , CT , DE , DC , IN , IA , KS , KY , LA , ME , MD , MA , MI NE , NV , NH , NJ , NM , NY , NC , ND , OH SC , SD , TN , TX , UT , VT , VA , WA , WV  Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply	, MN , , OK ,	MS , MO	O, MT,

lacksquare Own website  $\ \square$  Another's website  $\ \square$  Upon request  $\ \square$  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 financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records LAURA MORALES 700 LIGHT STREET Baltimore, MD 212303850 (410) 230-2700

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 .

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

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

- 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)
- organization and any related organizations • List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (E) (A) (F) (B) (C) (D) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation amount of other hours per compensation week (list person is both an officer from the from related compensation anv hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Individual to or director Highest employ MISC) MISC) organizations 6 related Institutional 호 below dotted organizations employ 3 line) con trustee P pensat Ē 12 0 (1) DR WILLIAM J CRAFT Х Chairperson 0.0 3 0 (2) MS LINDA K REISER Х 0 0 Х 0 0 4 0 (3) THE REV TIMOTHY RUNTSCH Х Χ Secretary 0 0 5 5 (4) Ms Hılda Bambı Arellano 0.0 5 0 (5) Mr Emried Cole JR Х 0 0 0 8 0 (6) Dr Louise Evenson 0 0 X Director 0 0 5 5 (7) Mr Steve Gunderson 0 0 12 0 0 0 0 4 0 (9) Mr Jayesh Hines-Shah n 0 Х 0 0 5 0 (10) Mr Kenneth Jones II . . . . . Director 0.0 3 5 (11) The Rev Dr David Lose 0 Х 0 0 10 (12) Dr Kathı Tunheım 0 0 Director 0.0 10 (13) Ms Kristin Yakımow 0.0

56 19 (14) AMB DANIEL V SPECKHARD RT Х 298,459 0 66.658 PRESIDENT AND CEO 0 0 46 19 (15) MS JOANN THEYS Х 172,077 19,110 VP FIN & ADMIN/TREAS 0 0 46 34 (16) MR TIMOTHY MCCULLY Х 169,177 41,514 SVP INTERNATIONAL PROGRAMS 0.0 43 28 (17) MS EMILY SOLLIE Х 99.659 29.220 SR DIR, EXEC COMMUNICATIONS 0 0 Form 990 (2017) Name and Title

Part VII

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

Estimated

(C)

Compensation

1,068,118

532,067

406,600

402,107

200,289

Form **990** (2017)

(B)

Description of services

WAREHOUSE/PROCESSING

WAREHOUSE/PROCESSING

FUNDRAISER

CONSULTING

INTL FREIGHT SHIP

Reportable

(D)

Reportable

Page 8

	hours per week (list any hours			n of	ficei	and a	1	compensation from the organization (W-	compensation from related organization (W- 2/1099	d ns	amount of compen from	sation the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	key employee	Highest compensated employee	Former	2/1099-MISC)	MISC)		organizat relat organiz	:ed
(18) MS ANDREA GREISE				×				73,395		0		21,911
ASSISTANT SECRETARY  (19) MS WENDY ROTHENBERGER	0 0 44 41											
(19) MS WENDY KOTHENBERGER						x		155,317		o		24,045
VP, PRESIDENT'S OFFICE & HR	0 0							,				
(20) MS GERALDINE SICOLA	46 15					l x		154,135		اه		23,356
VP, STRATEGIC PSHIPS & EXT REL	0 0	••••				^		134,133		٩		23,330
(21) MR MICHAEL WATT	44 79											
VP INTERNATIONAL OPERATIONS	0 0	••••				X		145,355		이		22,441
(22) MR STOJGNIEW STANISZEWSKI	46 77											
SR DIRECTOR OF TECHNOLOGY	0 0	••••				X		144,859		0		41,130
(23) MR RICHARD SLACUM	44 98									$\dashv$		
` '	0.0					×		143,153		0		15,991
CHIEF OF PARTY - SESAME	00											
1b Sub-Total					_							
c Total from continuation sheets to Part				•	,							
d Total (add lines 1b and 1c)	•				,			1,555,586		0		305,376
Total number of individuals (including but of reportable compensation from the organization)	not limited to t				/e) v	vho re	ceiv	· · ·		<u> </u>		303,370
											Yes	N.
3 Did the organization list any <b>former</b> office							_	•	mployee on		Yes	No
line 1a? If "Yes," complete Schedule J for	such individual		•	•	٠		•		• •	3		No
4 For any individual listed on line 1a, is the organization and related organizations ground in the second control of the second con	eater than \$150	,000?							he			
ındıvıdual		•	•	•	•	•	•			4	Yes	
<b>5</b> Did any person listed on line 1a receive o services rendered to the organization? <i>If</i> "							-	•		5		No

Position (do not check more

		_ L			
c 1	otal from continuation sheets to Part VII, Section A	•			
d٦	otal (add lines 1b and 1c)	• [	1,555,586	0	
2	Total number of individuals (including but not limited to those listed above) we of reportable compensation from the organization $\blacktriangleright$ 17	vho	o received more than	\$100,000	

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation

from the organization Report compensation for the calendar year ending with or within the organization's tax year

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

(A)

Name and business address

(B)

Average

Section B. Independent Contractors

compensation from the organization  $\blacktriangleright$  5

1

MERKLE INC,

ST PAUL, MN 55075 BRETHREN SERVICE CENTER,

161 N CLARK ST CHICAGO, IL 60601

500 MAIN ST PO BOX 188 NEW WINDSOR, MD 21776 ACCENTURE LLP,

7001 COLUMBIA GATEWAY DRIVE COLUMBIA, MD 21046 MIDWEST WAREHOUSE INC, 398 EAST RICHMOND ST

CARGO BROKERS INTERNATIONAL,

1515 SHOPTON ROAD SUITE 104 CHARLOTTE, NC 28217

orm 99		Statement of									Page <b>S</b>
		Check if Schedul	e O contains	a resp	onse or note to any	(A) Total revenu		(B) Related exemp functio	or t n	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	<b>1</b> a	Federated campaig	ns	1a	170,961			revenu	e		512-514
nts Ints	Ŀ	• Membership dues		1b							
573 not		: Fundraising events		1c							
S, (		d Related organization		1d	637						
<u>.</u>		Government grants (c		1e	6,830,918						
ions, r Sim		All other contributions     and similar amounts in     above	, gıfts, grants,	1f	39,982,073						
Contributions, Giffs, Grants and Other Similar Amounts	ç	Noncash contribute in lines 1a-1f \$	ons included	13,4	418,854						
S E	h	Total.Add lines 1a-1	lf		•	46,984,5	89				
<u>1</u>	_				Business	Code					
Program Service Revenue	<b>2</b> a	CONTRACT REVENUE				541900	78	9,053	789,05	3	
á	b			_							
ac e	c			_							
<u></u>	d			_							
Ē	e			_							
ogra	f	All other program se	rvice revenue	2		,00 0E3					
ğΪ	g.	Total.Add lines 2a-2	f		<b>&gt;</b>	'89,053					
		Investment income (i				6	00,152				600,15
		imilar amounts)  . Income from investm			and proceeds	<u> </u>	0				000,13.
		Royalties					0				
	٠,	toyaldes ! !	(ı) Rea		(II) Personal	<u> </u>					
	6a	Gross rents	.,		. ,	1					
						_					
	b	Less rental expenses									
	c	Rental income or		0	(	5					
	_	(loss)									
	a	Net rental income o			<u> </u>		- 0				
	72	Gross amount	(ı) Securi	ties	(II) Other	-					
	<i>,</i> a	from sales of assets other	89,8	345,423							
		than inventory									
	b	Less cost or				1					
		other basis and sales expenses	8/,,	756,587							
		Gain or (loss)		088,836							
		Net gain or (loss)			<b>•</b>	2,0	88,836				2,088,836
		Gross income from f (not including \$		ents of							
T.		contributions reporte	ed on line 1c)								
ě		See Part IV, line 18				4					
π		Less direct expense Net income or (loss)					0				
Other Revenue		Gross income from g		_	ents •	1					
0		See Part IV, line 19			)						
				a	_	1					
		Less direct expense		b			٥				
		Net income or (loss) Gross sales of invent		activit	iles <b>&gt;</b>	1					
	-00	returns and allowand									
				а							
	b	Less cost of goods s	sold	b	0						
	С	Net income or (loss)		inven			0				
	11	Miscellaneous	Revenue		Business Code	7	50 654				50.65
	11	<b>a</b> MISCELLANEOUS			900099	<u></u>	50,654				50,654
	b	•									
	C										
		All other revenue .									
	е	Total. Add lines 11a	-11d		•		50,654				
	12	Total revenue. See	Instructions						780 052		2 720 641
						50,5	13,284		789,053		2,739,642

Forr	m 990 (2017)				Page <b>10</b>
	art IX Statement of Functional Expenses				
Sect	tion 501(c)(3) and 501(c)(4) organizations must complete all col	-	•	lete column (A)	
	Check if Schedule O contains a response or note to any l	line in this Part IX			<u> </u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	(B) Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraisingexpenses
1	. Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	116,608	116,608		
2	P. Grants and other assistance to domestic individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	23,607,451	23,607,451		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,832,420	267,327	1,499,884	65,209
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	10,745,610	8,640,161	1,226,467	878,982
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	575,016	558,047	12,659	4,310
9	Other employee benefits	2,614,448	2,131,987	222,543	259,918
10	Payroll taxes	1,231,737	512,290	683,032	36,415
11	Fees for services (non-employees)				
í	a Management	0			
ļ	<b>b</b> Legal	138,567	14,465	123,070	1,032
•	c Accounting	107,631	41,619	66,012	
•	<b>d</b> Lobbying	0			
•	e Professional fundraising services See Part IV, line 17	516,213			516,213
f	f Investment management fees	0			
٩	g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,331,797	1,304,658	897,355	129,784
12	Advertising and promotion	0			
13	Office expenses	2,577,764	1,353,431	381,427	842,906
14	Information technology	0			
15	Royalties	0			
16	Occupancy	898,760	800,772	43,693	54,295
17	Travel	2,404,465	1,990,855	304,055	109,555
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	150,442	116,703	16,710	17,029

89,766

3,003,166

377,704

141,257

761,201

54,222,023

47,393

33,961

3,003,166

2,320

121,447

665,734

45,283,002

9,811

55,805

121,706

9,156

79,830

5,743,404

33,871

253,678

10,654

15,637

3,195,617

Form **990** (2017)

3,711

23 Insurance . . .

a PROGRAM INPUTS

c MEMBERSHIP FEES

d MISCELLANEOUS

e All other expenses

expenses on Schedule O )

**b** BANK AND MERCHANT FEES

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

25 Total functional expenses. Add lines 1 through 24e

26 Joint costs. Complete this line only if the organization

reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☑ If following SOP 98-2 (ASC 958-720)

(A)

Beginning of year

1,784,716

8,490,636

1,265,463

484.547

3,418,285

6.318.381

13,200,755

30,266,101

8,100,701

38,630,540

51,831,295

263.738

25

26

27

28

29

30

31

32

33

34

22.860.826

10c

11

12

1

2 3 Page **11** 

1,386,363

2,755,722

1,910,593

404,239

19,778,321

3,813,515

9.372.652

15,464,481

27,339,133

6,866,661

34,478,533

49,943,014

Form **990** (2017)

272,739

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

Cash-non-interest-bearing

b Less accumulated depreciation

Investments—publicly traded securities

Investments—other securities See Part IV, line 11 .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here  $\blacktriangleright$   $\square$  and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . .

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Savings and temporary cash investments

Pledges and grants receivable, net .

	4	Accounts receivable, net			1,594,757	4	1,587,093
	5	Loans and other receivables from current and fo trustees, key employees, and highest compensa II of Schedule L	0	5	0		
s	6	Loans and other receivables from other disqualif section 4958(f)(1)), persons described in section contributing employers and sponsoring organizations (unitary employees' beneficiary organizations (Part II of Schedule L	n 4958 tions c	(c)(3)(B), and f section 501(c)(9)	0	6	0
ets	7	Notes and loans receivable, net			0	7	0
Ass	8	Inventories for sale or use			5,030,387	8	4,989,200
⋖	9	Prepaid expenses and deferred charges			196,324	9	200,408
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	1,918,791			

1,514,552

10b

11

12

26

27

28

29

30

31

32

33

34

Assets or Fund Balances

Net

13	Investments—program-related See Part IV, line 11	3,679,220	13	3,598,281
14	Intangible assets	0	14	0
15	Other assets See Part IV, line 11	3,026,134	15	9,519,279
16	Total assets.Add lines 1 through 15 (must equal line 34)	51,831,295	16	49,943,014
17	Accounts payable and accrued expenses	4,962,440	17	4,289,850
18	Grants payable	0	18	0
19	Deferred revenue	0	19	0
20	Tax-exempt bond liabilities	1,919,934	20	1,801,979
<u>ဟု</u> 21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
Selifies	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			

	17	Accounts payable and accrued expenses	4,962,440	17	4,289,850
	18	Grants payable	0	18	0
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	1,919,934	20	1,801,979
ý	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
E	21	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
<u> </u>		persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0

☐ Cash ☑ Accrual ☐ Other

Both consolidated and separate basis

☐ Both consolidated and separate basis

Page **12** 

-443.268

34,478,533

No

Νo

Yes

Yes

Yes

Yes

Yes (2017)

2a

2b

2c

3a

3b

7 8

9

10

Other changes in net assets or fund balances (explain in Schedule O) . . . . . . . . .

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))

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

If the organization changed its method of accounting from a prior year or checked "Other," explain in

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

Form 990 (2017)

Part XII

Schedule O

☐ Separate basis

consolidated basis, or both

Separate basis

Audit Act and OMB Circular A-133?

1 Accounting method used to prepare the Form 990

separate basis, consolidated basis, or both

**Financial Statements and Reporting** 

#### Additional Data

Software ID:

Software Version: **EIN:** 13-2574963

Name: Lutheran World Relief

Form 990 (2017)

Form 990, Part III, Line 4a: EMERGENCIES AND MATERIAL RESOURCES LUTHERAN WORLD RELIEF RESPONDS TO NATURAL DISASTERS AND CONFLICT-DRIVEN EMERGENCIES, ESPECIALLY THOSE THAT AFFECT THE WORLDS POOREST COMMUNITIES. WE WORK WITH VULNERABLE COMMUNITIES TO HELP THEM REBUILD AFTER DISASTER STRIKES AND PREPARE FOR FUTURE DISASTERS IN FISCAL YEAR 2018, WE ENGAGED IN 65 EMERGENCY RESPONSE AND MATERIAL RESOURCES PROJECTS AROUND THE WORLD IN ADDITION, LUTHERAN WORLD RELIEF AND OUR PARTNERS CONDUCTED 29 DISTRIBUTIONS OF MISSION OUILTS OR CARE KITS REACHING MORE THAN 600,000 PEOPLE

AGRICULTURE LUTHERAN WORLD RELIEF WORKS WITH POOR, RURAL COMMUNITIES AROUND THE WORLD TO HELP FARMERS IMPROVE THEIR CROPS, LEARN NEW TECHNIQUES AND TOOLS TO INCREASE THEIR YIELD AND ATTRACT BUYERS WHO WILL PAY MORE FOR THEIR PRODUCTS WE HELP RURAL COMMUNITIES DEVELOP PRODUCTIVE, RESILIENT AND STABLE ECONOMIES THROUGH AN ENTERPRISE-BASED APPROACH THAT ENGAGES THE PRIVATE SECTOR AT MULTIPLE LEVELS TO CREATE PROFITABLE PARTNERSHIPS THAT BENEFIT FAMILIES AND PROMOTE RURAL LIVELIHOODS IN FISCAL YEAR 2018. WE CARRIED OUT 55 PROGRAMS FOCUSED ON

Form 990, Part III, Line 4b:

AGRICULTURE AND FOOD SECURITY THAT ENGAGED APPROXIMATELY 130,000 FARMERS

# CLIMATE CHANGE LUTHERAN WORLD RELIEF HELPS COMMUNITIES PROTECT THEIR AGRICULTURAL ASSETS IN THE FACE OF CHALLENGING CLIMATE CONDITIONS AND IMPROVE THEIR RESILIENCE TO NATURAL HAZARDS LIKE FLOODS AND DROUGHTS IN FISCAL YEAR 2018, LUTHERAN WORLD RELIEF IMPLEMENTED APPROXIMATELY 22 PROJECTS THAT INVOLVED CLIMATE STRATEGIES AND APPROACHES WE INTRODUCED ENVIRONMENTALLY SUSTAINABLE FARMING PRACTICES SO THAT COMMUNITIES

GET THE MOST OUT OF THEIR LAND WHILE CONSERVING AND RESTORING THEIR NATURAL RESOURCES WE ALSO WORKED WITH LOCAL AND NATIONAL GOVERNMENTS TO FACILITATE THE EOUITABLE ACCESS TO AND PROTECTION OF NATURAL RESOURCES, HELPING COMMUNITIES ASSESS THEIR VULNERABILITIES TO NATURAL HAZARDS

Form 990, Part III, Line 4c:

AND DEVELOP THE PLANS AND SKILLS THEY NEED TO PREPARE FOR THEM

efil	e GR/	APHIC pri	nt - DO NO	T PROCESS	As Filed Data -			DLN: 9	3493042005159
SCI	HED	ULE A			Charity Statu	s and Pul	olic Supp		OMB No 1545-0047
•	m 99	0 or	Con		rganization is a sect	ion 501(c)(3)	organization o		2017
990I	SZ)				4947(a)(1) nonexe  ▶ Attach to Form				
		f the Treasury	► Infe	ormation abou	it Schedule A (Form www.irs.a	990 or 990-EZ ov/form990.	) and its instru	ıctions is at	Open to Public Inspection
Nam	e of th	<del>nue Service</del> <b>he organiza</b> rld Relief	tion		<u></u>			Employer identific	
Lutilei	an wo	na Kellel						13-2574963	
	rt I				<b>us</b> (All organization : it is (For lines 1 thro			See instructions.	
1	n garnz		•		`	<b>3</b> ,	,	(A)(:)	
_		•		·	sociation of churches				
2					<b>1)(A)(ii).</b> (Attach Scl	•	• •		
3		·	•	•	vice organization desc			•	
4			esearch orga and state _	nization operat	ed in conjunction with	a hospital descri	bed in <b>section</b> :	170(b)(1)(A)(iii). E	nter the hospital's
5			ition operate ( <b>iv).</b> (Comple		t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	ped in <b>section 170</b>
6		A federal, s	tate, or local	government or	governmental unit de	escribed in <b>sectio</b>	on 170(b)(1)(A	\)(v).	
7	✓			mally receives (vi). (Complete	a substantial part of it Part II )	s support from a	governmental u	init or from the gener	al public described in
8		A communi	ty trust desc	rıbed ın <b>sectior</b>	170(b)(1)(A)(vi)	(Complete Part I	I)		
9					escribed in <b>170(b)(1)</b> ee instructions Enter				ege or university or a
10		from activit	ies related to income and	o its exempt fur unrelated busin	(1) more than 331/39 ctions—subject to cer ess taxable income (lemplete Part III)	taın exceptions, a	and (2) no more	than 331/3% of its su	
11					exclusively to test fo	r public safety S	ee section 509	(a)(4).	
12		more public	ly supported:	organizations of	d exclusively for the be described in <b>section 5</b> the type of supporting	<b>i09(a)(1)</b> or <b>se</b> d	ction 509(a)(2	). See <b>section 509(</b> a	e purposes of one or )(3). Check the box
a		<b>Type I.</b> A so	supporting or n(s) the pow	ganızatıon oper	ated, supervised, or c appoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by	
b		<b>Type II.</b> A manageme	supporting on t of the sup	rganization sup porting organiza	ervised or controlled i				
С		Type III f	unctionally		supporting organizatio				ted with, its
d		Type III n functionally	on-function integrated	nally integrate The organizatio	ons) You must com d. A supporting organ n generally must satis	ization operated fy a distribution i	ın connection wi requirement and	th its supported orgar	
e		Check this	box if the org	anızatıon recei	t IV, Sections A and ved a written determin	nation from the II		pe I, Type II, Type II	functionally
f	Entor			ion-functionally dorganizations	integrated supporting	organization			
g				_	ipported organization(	(e)		_	
		Name of support organization	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document? (see instructions)		(vi) Amount of other support (see instructions)	
						Yes	No		
				L					
Tota	l	work Reduc							

14

15

Schedule A (Form 990 or 990-EZ) 2017

98 654 %

98 580 %

▶Ⅵ

III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support

	ection A. Fublic Support						
	Calendar year	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	(or fiscal year beginning in) ▶	(-,	(-,	(-,	(,	(-,	(1)
1	Gifts, grants, contributions, and	45 000 226	46 222 000	46 404 220	E1 770 744	46 004 500	226 276 070
	membership fees received (Do not	45,098,326	46,233,099	46,181,220	51,779,744	46,984,589	236,276,978
_	include any "unusual grant ")						
2	Tax revenues levied for the						
	organization's benefit and either						0
	paid to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						0
	the organization without charge						
4	Total. Add lines 1 through 3	45,098,326	46,233,099	46,181,220	51,779,744	46,984,589	236,276,978
5	The portion of total contributions by						
_	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						0
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5						236,276,978
	from line 4						230,270,976
S	ection B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2013	<b>(b)</b> 2014	(c)2015	(d)2016	<b>(e)</b> 2017	<b>(f)</b> Total
-	Amounts from line 4	45,098,326	46,233,099	46,181,220	51,779,744	46,984,589	236,276,978
7		45,096,326	40,233,099	40,101,220	31,779,744	40,964,369	230,270,976
8	Gross income from interest,						
	dividends, payments received on	660 773	605 733	E04 022	E12.406	600 153	2.060.005
	securities loans, rents, royalties and income from similar sources	669,772	605,732	581,923	512,406	600,152	2,969,985
	and income from similar sources						
9	Net income from unrelated						
	business activities, whether or not						0
	the business is regularly carried on						O
10	Other income Do not include gain						
	or loss from the sale of capital	1,221	19,895	112,492	69,496	50,654	253,758
	assets (Explain in Part VI )						
11	Total support. Add lines 7 through						220 500 724
	10						239,500,721
12	Gross receipts from related activities,	etc (see instructio	ns)			12	2,188,866

6	line 1 that exceeds 2% of the amount shown on line 11, column (f)  Public support. Subtract line 5 from line 4						236,276,978
- 5	Section B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2013	<b>(b)</b> 2014	<b>(c)</b> 2015	<b>(d)</b> 2016	<b>(e)</b> 2017	<b>(f)</b> Total
7	Amounts from line 4	45,098,326	46,233,099	46,181,220	51,779,744	46,984,589	236,276,978
8	Gross income from interest, dividends, payments received on	669 772	605 732	581 923	512 406	600 152	2 969 985

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization,

16a 33 1/3% support test-2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

b 33 1/3% support test-2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

17a 10%-facts-and-circumstances test-2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 Schedule A, Part II, line 14

organization

instructions

supported organization

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))

and stop here. The organization qualifies as a publicly supported organization

box and stop here. The organization qualifies as a publicly supported organization

Р	Support Schedule for							
	(Complete only if you checked the box on line 10 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	ection A. Public Support	quality under t	ine tests listed i	below, please co	ompiete Part II.,	)		
	Calendar year	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total	
_	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(6) 2015	(4) 2016	(e) 2017	(I) Iotai	
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							
4	under section 513 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							
	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							
	Add lines 7a and 7b							
8	Public support. (Subtract line 7c							
S	from line 6 ) ection B. Total Support							
	Calendar year							
	(or fiscal year beginning in) ▶	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total	
9								
10a	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties and income from similar sources							
ь	Unrelated business taxable income							
	(less section 511 taxes) from							
	businesses acquired after June 30, 1975							
c	Add lines 10a and 10b							
11	Net income from unrelated business							
	activities not included in line 10b,							
	whether or not the business is							
12	regularly carried on Other income Do not include gain or							
12	loss from the sale of capital assets							
	(Explain in Part VI )							
13	Total support. (Add lines 9, 10c,							
14	11, and 12)  First five years. If the Form 990 is for	l r the organization	l 's first, second, th	L urd, fourth, or fift	l lax vear as a sec	ction 501(c)(3) o	l rganization.	
	check this box and <b>stop here</b>			,,	,		▶ □	
Se	ection C. Computation of Public S	Support Perce	ntage					
15	Public support percentage for 2017 (lin			column (f))		15		
16	Public support percentage from 2016 S	chedule A, Part II	II, line 15			16		
Se	ction D. Computation of Investr	nent Income	Percentage					
17	Investment income percentage for 201	7 (line 10c, colur	nn (f) divided by	lıne 13, column (f	·))	17		
18	Investment income percentage from 20	<b>016</b> Schedule A, I	Part III, line 17			18		
	<b>331/3% support tests—2017.</b> If the	organization did n	ot check the box	on line 14, and lir	ne 15 is more than		e 17 is not	
	more than 33 1/3%, check this box and s						ightharpoons	
	33 1/3% support tests—2016. If the						. —	
_	not more than 33 1/3%, check this box	-			· ·		ightharpoons	
20	Private foundation. If the organization	-	-				ightharpoons	

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V ) Section A. All Supporting Organizations

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1	İ	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2)			
	in section 309(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the			
	determination	3b		

b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the	·			
	determination 31				
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?				
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use				
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked 12a or 12b in Part I, answer (b) and (c) below	4a			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported				

				3.
c	Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)(B)$ purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use	-		
		3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or		$\overline{}$	
	supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections			
	501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes		$\overline{}$	
		4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and			

			, ,	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or	4b		
С	supervised by or in connection with its supported organizations Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes			
		4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the			
	organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		

6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing	6	
	organization's supported organizations? If "Yes," provide detail in <b>Part VI.</b>	6	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a		
	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)		

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

10a

answer line 10b below

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"		
	complete Part I of Schedule L (Form 990 or 990-EZ)	8	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as		i

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defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"
provide detail in Part VI.
```

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

```
9a
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

Pa	rt IV Supporting Organizations (continued)			-9		
			Yes	No		
11	Has the organization accepted a gift or contribution from any of the following persons?					
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a				
b	A family member of a person described in (a) above?	11b				
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c				
	ection B. Type I Supporting Organizations					
			Yes	No		
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year					
_		1				
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization					
5	ection C. Type II Supporting Organizations					
	cetion c. Type 11 Supporting Organizations		Yes	No		
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the					
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1				
S	ection D. All Type III Supporting Organizations					
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		Yes	No		
		1				
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)					
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard					
s	ection E. Type III Functionally-Integrated Supporting Organizations					
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct  The organization satisfied the Activities Test. Complete line 2 below  The organization is the parent of each of its supported organizations. Complete line 3 below  The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see		ctions)			
2	Activities Test Answer (a) and (b) below.		Yes	No		
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a				
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b				
3	Parent of Supported Organizations Answer (a) and (b) below.					
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a				
	<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in <b>Part VI.</b></i> the role played by the organization in this regard	3b				

Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year) a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 2 Acquisition indebtedness applicable to non-exempt use assets 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 8

Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 6

2 4 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

3	Administrative expenses paid to accomplish exempt purposes of supported organizations	<u> </u>
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in <b>Part VI</b> ) See instructions	
7	Total annual distributions. Add lines 1 through 6	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ) See instructions	
9	Distributable amount for 2017 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

8	Distributions to attentive supported organizations to wh details in <b>Part VI</b> ) See instructions			
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			

details in <b>Part VI</b> ) See instructions					
(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017			
	(i)	(i) (ii) Underdistributions			

9 Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
Distributable amount for 2017 from Section C, line     6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
<b>b</b> From 2013			
c From 2014			_
d From 2015			

e From 2016. . . . . . f Total of lines 3a through e

**d** Excess from 2016. . . . e Excess from 2017. . . . .

instructions)

g Applied to underdistributions of prior years h Applied to 2017 distributable amount i Carryover from 2012 not applied (see

j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2017 from Section D, line 7

a Applied to underdistributions of prior years **b** Applied to 2017 distributable amount

c Remainder Subtract lines 4a and 4b from 4		
<b>5</b> Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions		
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions		
<b>7 Excess distributions carryover to 2018.</b> Add lines 3 <sub>1</sub> and 4c		

lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions		
<b>7 Excess distributions carryover to 2018.</b> Add lines 3 <sub>1</sub> and 4c		
8 Breakdown of line 7		
a Excess from 2013		
<b>b</b> Excess from 2014		
c Excess from 2015		

Schedule A (Form 990 or 990-EZ) (2017)

### **Additional Data**

#### Software ID: Software Version:

EIN: 13-2574963

Name: Lutheran World Relief

Page 8

Schedule A (Form 990 or 990-EZ) 2017

Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II,

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

# Facts And Circumstances Test

**SCHEDULE C** 

## **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

DLN: 93493042005159

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990 or 990-

EZ)

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

Inspection

f the	Section 501(c) (other than section Section 527 organizations Complete organization answered "Yes" of Section 501(c)(3) organizations that Section 501(c)(3) organizations that organization answered "Yes" of any Tax) (see separate instruction Section 501(c)(4), (5), or (6) organization answered materials in the control of	on Form 990, Part IV, Line 4, or Form at have filed Form 5768 (election under at have NOT filed Form 5768 (election i on Form 990, Part IV, Line 5 (Proxy Tans), then	ts I-A and C below 990-EZ, Part VI, III section 501(h)) Counder section 501(h	ne <b>47 (Lobbying Ac</b> omplete Part II-A Do n)) Complete Part II- instructions) or For	tivitie: not co B Do m 990	omplete Par not complet )-EZ, Part V	te Part II-A /, line 35c
	me of the organization neran World Relief			Employe	er ider	ntification	number
				13-25749			
Par	t I-A Complete if the orga	inization is exempt under secti	on 501(c) or is	a section 527 or	rgani	ization.	
1	"political campaign activities")	nization's direct and indirect political ca 	ampaign activities ii	n Part IV (see instruc	tions	for definition	n of
2 3	Political campaign activity expen	,		1	<b>&gt;</b>	\$	
		paign activities (see instructions) Inization is exempt under secti	on 501(c)(3)				
1		ax incurred by the organization under				<b></b>	
2	,	ax incurred by organization managers			•	\$ \$	
3	•	ction 4955 tax, did it file Form 4720 for					es 🗆 No
4a	Was a correction made?	·	•				
_						☐ Ye	es 🗌 No
b Par	If "Yes," describe in Part IV  Complete if the organic	ınization is exempt under secti	on 501(c), exc	ept section 501(	c)(3)	).	
1	<u> </u>	ded by the filing organization for section			-/ <u>(</u> -/	-	
2	, ,	ganization's funds contributed to other	•			Ψ	
	function activities		J	•	•	\$	
3	Total exempt function expenditu	res Add lines 1 and 2 Enter here and	on Form 1120-POL,	line 17b	<b>&gt;</b>	\$	
4	Did the filing organization file <b>Fo</b>	rm 1120-POL for this year?					es 🗆 No
5	organization made payments Fo of political contributions received	employer identification number (EIN) or r each organization listed, enter the a l that were promptly and directly delive tee (PAC) If additional space is needed	nount paid from the ered to a separate p	e filing organization's political organization,	funds	ich the filing Also enter	the amount
	(a) Name	(b) Address	(c) EIN	(d) Amount paid filing organization funds If none, ei -0-	on's	contribut and pr directly separa organiza	unt of political tions received romptly and delivered to a ate political ation. If none, ater -0-
1							
2							
3							
4							
5							
5							

2a Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e)) Grassroots lobbying expenditures

(a) (b) For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity Yes No Amount During the year, did the filing organization attempt to influence foreign, national, state or local legislation, 1 including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers? No Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Yes Media advertisements? Nο c d Mailings to members, legislators, or the public? Nο Publications, or published or broadcast statements? No е Grants to other organizations for lobbying purposes? No Direct contact with legislators, their staffs, government officials, or a legislative body? Yes 912 Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Nο Other activities? Νo Total Add lines 1c through 1i 912 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? Nο If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-A 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 2 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b b Carryover from last year c Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information Return Reference Explanation Schedule C, Part II-B, Line 1b LWR paid staff to meet with or send e-mail correspondence to congressional staff and administration officials

security in particular

regarding policies on international development, foreign assistance and humanitarian response. Most of this work involved general education or information on these topics, but on some occasions concerned relevant authorizing or appropriations legislation on humanitarian and development assistance and global food

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE D** 

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

DLN: 93493042005159 OMB No 1545-0047

> Open to Public **Inspection**

Department of the Treasury

(Form 990)

Internal Revenue Service Information about Schedule D (Form 990) and its instructions is at <u>www.irs.gov/form990</u>.

	me of the organization Ieran World Relief			Employer ide	ntification	number
Luu	leran world Rener			13-2574963		
Pa	rt I Organizations Maintaining Donor Advi Complete if the organization answered "Ye		nds or	Accounts.		
	Complete if the organization answered Te	(a) Donor advised funds		(b)Funds	and other a	accounts
-	Total number at end of year	(a) police davised railes		(5), and	and other c	
2	Aggregate value of contributions to (during year)					
1	Aggregate value of grants from (during year)					
ļ	Aggregate value at end of year					
	Did the organization inform all donors and donor adviso	rs in writing that the assets held in don	or advi	sed funds are t	he	
	organization's property, subject to the organization's ex		ioi aavi	sea ranas are e	_	Yes 🗌 No
5	Did the organization inform all grantees, donors, and di charitable purposes and not for the benefit of the donor private benefit?				_	Yes 🗌 No
Pai	till Conservation Easements. Complete if the	ne organization answered "Yes" on	Form	990, Part IV,	lıne 7.	
	Purpose(s) of conservation easements held by the orga	nızatıon (check all that apply)				
	$\square$ Preservation of land for public use (e g , recreatio	n or education)  Preservation	of an h	storically impo	rtant land a	rea
	Protection of natural habitat	☐ Preservation	of a cer	tified historic s	tructure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservation contribution in th	he form		ion the End o	f the Year
а	Total number of conservation easements		:	2a	tile Ella e	· ciic i cui
b	Total acreage restricted by conservation easements			2b		
С	Number of conservation easements on a certified histor	c structure included in (a)		2c		
d	Number of conservation easements included in (c) acquistructure listed in the National Register	ired after 8/17/06, and not on a historic	c 2	2d		
1	Number of conservation easements modified, transferred tax year ▶	ed, released, extinguished, or terminate	ed by th	e organization	during the	
ŀ	Number of states where property subject to conservation	on easement is located >				
;	Does the organization have a written policy regarding t and enforcement of the conservation easements it hold		dling of	violations,	☐ Yes	□ No
•	Staff and volunteer hours devoted to monitoring, inspe	cting, handling of violations, and enforce	ing con	servation easer	ments durin	g the year
,	Amount of expenses incurred in monitoring, inspecting, ▶ \$	handling of violations, and enforcing co	onserva	tion easements	during the	year
3	Does each conservation easement reported on line 2(d)	above satisfy the requirements of sect	tion 170	(h)(4)(B)(ı)		
	and section 170(h)(4)(B)(II)?	,		. , , , , , ,	☐ Yes	□ No
)	In Part XIII, describe how the organization reports consbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	footnote to the organization's financial				
ar	Organizations Maintaining Collections Complete if the organization answered "Ye		Othe	r Similar Ass	sets.	
.a	If the organization elected, as permitted under SFAS 1: art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its final	public exhibition, education, or researc	ch in fur			
b	If the organization elected, as permitted under SFAS 1: historical treasures, or other similar assets held for pub following amounts relating to these items					
(	i) Revenue included on Form 990, Part VIII, line 1			▶ \$		
	i)Assets included in Form 990, Part X			<b>▶</b> \$		
2	If the organization received or held works of art, historic following amounts required to be reported under SFAS		r financ	ıal gaın, provid	e the	
а	Revenue included on Form 990, Part VIII, line 1	·		<b>▶</b> \$		
b	Assets included in Form 990, Part X			<b>-</b> \$		
					<del></del>	

Par	11111	Organizations Maintainii	ng Collections o	of Art, F	listori	cal T	reas	ures, o	r Other	Similar A	ssets (	contin	iued)	
3	Using items	the organization's acquisition, as (check all that apply)	ccession, and other	records,	check	any of	the fo	ollowing t	hat are a	significant	use of its	colle	ction	
а		Public exhibition			d		Loar	n or exch	ange pro	grams				
b		Scholarly research			e		Othe	er						
c		Preservation for future generation	ons											
4	Provide Part	de a description of the organizati KIII	on's collections and	l explain l	how the	ey furti	her th	ne organiz	zation's e	xempt purp	ose in			
5		g the year, did the organization s s to be sold to raise funds rather								nılar	□ Ye	es	□ N	lo
Pa	rt IV	Escrow and Custodial Ar Complete if the organizatio X, line 21.		" on For	m 990	, Part	IV,	line 9, o	r report	ed an amo	unt on I	-orm	990,	Part
1a	·													
ь	If "Y∈	es," explain the arrangement in P	art XIII and comple	ete the fo	llowing	table					Amount			_
С	Begin	ining balance	·		_				1c					_
d	Addıt	ions during the year							1d					_
е	Dıstrı	butions during the year							1e					_
f	Endın	ig balance							1f					_
<b>2</b> a	Did th	ne organization include an amour	nt on Form 990, Par	t X, line	21, for	escrov	v or c	ustodial a	ccount li	ability?	□ Ye	•	□ N	_  n
Ь	16 "Va	es," explain the arrangement in P	art VIII Chaek harr	<b>f</b> +b	(nlanat	on had	- 600	a provido	d in Dart	VIII				
_	rt V	Endowment Funds. Comp			•							•	<u> </u>	
1 4		Endovincine i ands. comp	(a)Currer			rior yea			ears back			<b>(e)</b> Fo	ur vea	rs back
1a	Beginn	ing of year balance		267,989	ν-7-		0,167	(-)	246,277	+	254,913	(-,-		249,272
Ь	Contrib	outions		9,001		13	3,000							4,791
С	Net inv	vestment earnings, gains, and los	sses	20,318		23	3,284		21,442	2	-4,461			18,402
d	Grants	or scholarships												
e		expenditures for facilities ograms		19,092		18	8,462		17,552	2	4,175			17,552
f	Admını	strative expenses												
g	End of	year balance		278,216		26	7,989		250,167	,	246,277			254,913
2	Provid	de the estimated percentage of ti	he current vear end	balance	(line 1	a. colu	mn (a	a)) held a	s					
а	Board	d designated or quasi-endowmen	t 🕨		•		`	,,						
ь	Perm	anent endowment ► 98 410	%											
c	Temp	orarily restricted endowment >	1 590 %											
·	-	percentages on lines 2a, 2b, and i		0%										
За	Are th	here endowment funds not in the	·		on tha	t are h	eld ar	nd admın	istered fo	r the		г	V	NI-
	_	nization by hrelated organizations									3	a(i)	Yes	No No
		elated organizations										a(ii)		No
b		es" on 3a(II), are the related orga		equired o	n Sche	dule R	. 7					3b		
4	Descr	ribe in Part XIII the intended use:	s of the organizatio	n's endov	vment 1	funds								
Pa	rt VI	Land, Buildings, and Equ	ipment.											
		Complete if the organization				•								
	Descri		ost or other basis investment)	(b) Cost	or other	basıs (	other)	(c) Acc	umulated	depreciation		( <b>d)</b> Bo	ok valu	е
1a	Land						41,125	5						41,125
b	Buildin	gs				ı	63,650			36,993				26,657
c	Leaseh	old improvements												
d	Equipn	nent				1,7	42,686	5		1,477,559				265,127
	Other						71,330							71,330
		lines 1a through 1e (Column (d)	must equal Form 9	90, Part .	X, colui	mn (B)	, line	10(c))		<b>&gt;</b>				404,239

Part VII Investments—Other Securities. Complete if See Form 990, Part X, line 12.	the organization answ	vered "Yes" on Form	990, Part IV, line 11b.
(a) Description of security or category (including name of security)	(b) Book value		ethod of valuation d-of-year market value
(1) Financial derivatives		Cost of Cit	a or year market value
(2) Closely-held equity interests			
(A) COMMINGLED INVESTMENT VEHICLE	2,354,596		F
(B) POOLED TRUST FUND (C)	1,458,919		F
(D)			
(E)			
(F)			
(G)			
(H)			
	2 012 515		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12 )  Part VIII Investments—Program Related.	<b>▶</b>   3,813,515		
Complete if the organization answered 'Yes' or			
(a) Description of investment	(b) Book value		ethod of valuation d-of-year market value
(1)CORPORATION (2)INVESTMENT IN DIVINE CHOCOLATE	3,433,278 165,003		C
(3)	,		
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )  Part IX Other Assets. Complete if the organization answer		irt IV, line 11d See Foi	rm 990, Part X, line 15
(a) Description (1) MONETIZATION RECEIVABLE			<b>(b)</b> Book value 6,367,835
(2) CHARITABLE TRUSTS			2,116,448
(3) OTHER ASSETS (4) INSURANCE CONTRACTS			643,563 391,433
(5)			331,433
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 )			<b>▶</b> 9,519,279
Part X Other Liabilities. Complete if the organization	n answered 'Yes' on Fo	rm 990, Part IV, line	
See Form 990, Part X, line 25.  1. (a) Description of liability	(b) B	ook value	
(1) Federal income taxes		0	
PURPOSES		3,004,817	
MONETIZATION LIABILITY (3)		6,367,835	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	<b>&gt;</b>	9,372,652	
2. Liability for uncertain tax positions In Part XIII, provide the text organization's liability for uncertain tax positions under FIN 48 (ASC		_	
organization a hability for uncertain tax positions under FIN 48 (ASC	c , -o, check here ii the	control the lootilote lid	S Seem Provided III Fait VIII E

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments . . . .

Investment expenses not included on Form 990, Part VIII, line 7b . . .

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

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

Other (Describe in Part XIII ) . . . . .

Add lines **4a** and **4b** . . . . . . .

**Supplemental Information** 

Donated services and use of facilities . .

Recoveries of prior year grants . . .

Other (Describe in Part XIII ) . . . .

Add lines 2a through 2d . .

Subtract line 2e from line 1 . .

Part XI

2

b

d

е 3

5

Part XIII

Schedule D (Form 990) 2017

Page 4

160,860

50,513,284

54,222,023

Schedule D (Form 990) 2017

4	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>				
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII )	4b			
c	Add lines <b>4a</b> and <b>4b</b>			4c	
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12 )			5	50,513,284
Par	<b>t XII</b> Reconciliation of Expenses per Audited Financial Statem Complete of the organization answered 'Yes' on Form 990, Part		•	leturr	1.
1	Total expenses and losses per audited financial statements			1	54,826,151
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				_
а	Donated services and use of facilities	2a	604,128		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII )	2d			
е	Add lines 2a through 2d			2e	604,128
3	Subtract line <b>2e</b> from line <b>1</b>			3	54,222,023
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

2a

2b

2c

2d

4b

-443,268

604.128

2e

3

4c

5

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

See Additional Data Table

Page <b>5</b>		Schedule D (Form 990) 2017			
	ormation (continued)	Part XIII Supplemental Info			
	Explanation	Return Reference			

Schedule D (Form 990) 2017

## **Additional Data**

**EIN:** 13-2574963 Name: Lutheran World Relief

Schedule D, Part V, Line 4

**Supplemental Information** 

Return Reference

Accordingly, all income is used for unrestricted purposes

Explanation

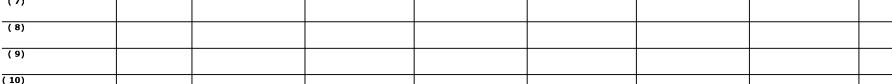
Software ID: Software Version:

Endowment gifts provided by donors do not have restriction on the use of income produced

Supplemental Information	
Return Reference	Explanation
Schedule D, Part X, Line 2	LWR is generally exempt from federal income taxes under the provisions of Section 501(c)(3) of the Internal Revenue Code. In addition, LWR qualifies for charitable contributions de ductions and has been classified as an organization that is not a private foundation. Income, which is not related to exempt purposes, less applicable deductions, is subject to federal and state corporate income taxes. For the year ended September 30, 2018, LWR has unrelated business income of \$29,309. LWR had no unrelated business income for the year ended September 30, 2017. Management has evaluated LWR's tax positions and has concluded that LWR has taken no uncertain tax positions that require adjustment to the consolidated financial statements to comply with U.S. GAAP. With Few exceptions, LWR is no longer subject to income tax examinations by the U.S. federal, state or local tax authorities for years befor e.2015.

efile GRAPHIC prin	ile GRAPHIC print - DO NOT PROCESS   As Filed Data - DLN: 934930420				
SCHEDULE F (Form 990)	Statement o	f Activities	Outside the Uni	OMB No 1545-0047	
(1 01111 000)	► Complete If the orga		Yes" to Form 990, Part IV, I to Form 990.	2017	
Department of the Treasury Internal Revenue Service	► Information about Sch	nedule F (Form 990)	and its instructions is at wi	vw.irs.gov/form990.	Open to Public Inspection
Name of the organization				Employer ider	ntification number
Lutheran World Relief				13-2574963	
	information on Activiti Part IV, line 14b.	es Outside the l	<b>Jnited States.</b> Comple	te if the organization a	enswered "Yes" to
<del>-</del>	<b>s.</b> Does the organization mathe grantees' eligibility for			_	
to award the grar		the grants or assi	stance, and the selection	criteria useu	☑ Yes ☐ No
2 For grantmaker outside the United	<b>s.</b> Describe in Part V the o d States	rganızatıon's proce	dures for monitoring the	use of its grants and ot	her assistance
3 Activites per Regio	n (The following Part I, line	3 table can be dupl	cated if additional space is	needed )	
(a) Region	(b) Number offices in the region			(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
( 1) See Add'l Data					
( 2)					
( 3)					
(4)					
( 5)					
3a Sub-total b Total from continua Part I	tion sheets to	43 143	3		22,979,709
c Totals (add lines 3	a and 3b)  Act Notice, see the Instruct	43 143		No 50082W Schedu	22,979,709 le F (Form 990) 2017

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
( 1) See Add'l Data								
( 2)								
(3)								
(4)								
( 5)							Schedule	F (Form 990) 2017
(6)								
(7)								
(8)								
( 9)								



(11) (12) (13)

IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

(14) (15)

(16)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-

exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . . . . .

58

(4) (5) (6) (7)

(8) (9) (10) (11) (12)

(13) (14) (15) (16) (17) (18) Page **3** 

Schedule F (Form 990) 2017

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.							
Part III can be duplicated if additional space is needed.							
(a) Type of grant or assistance	<b>(b)</b> Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
( 2)							
(3)							

Sche	dule F (Form 990) 2017		Page <b>4</b>
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	<b>☑</b> No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)	☐Yes	<b>☑</b> No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	<b>✓</b> Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐Yes	<b>☑</b> No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	□Yes	<b>☑</b> No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)	<b>✓</b> Yes	□No

Page 5

Part V

Supplemental Information
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Return
Reference

Explanation

Reference	Explanation
Schedule F, Part I, Line 2	LWR PARTNER ORGANIZATIONS (SUB-GRANTEES) ARE PROVIDED TECHNICAL MANAGEMENT AND CAPACITY BUILDING SUPPORT BY LWR STAFF THROUGHOUT THE LIFE CYCLE OF THE GRANT IN-COUNTRY STAFF TEAMS WORK CLOSELY WITH PARTNERS FROM THE BEGINNING PHASES OF PROJECT DEVELOPMENT THROUGH PROJECT COMPLETION PRE-AWARD ASSESSMENTS ARE CONDUCTED TO ASSESS OVERALL RISK (FINANCIAL SYSTEMS, TECHNICAL CAPACITY, TYPE/SIZE OF FUNDING AND EXPERIENCE WITH LWR, ETC.) ACTION PLANS, CAPACITY BUILDING AND MONITORING VISITS ARE PLANNED BASED ON RISK ASSESSMENT MONITORING IS DONE THROUGH A COMBINATION OF VERBAL AND SCHEDULED WRITTEN FINANCIAL AND PROGRAMMATIC REPORTS, AS WELL AS ON-SITE MONITORING VISITS DURING THE PROJECT FOR TECHNICAL SUPPORT AND VERIFICATION OF PROJECT ACTIVITIES ON-SITE MONITORING VISITS ARE ALSO OCCASSIONALLY CONDUCTED BY US-BASED FINANCE AND PROGRAM STAFF QUARTERLY OR MONTHLY (DEPENDING ON THE PROJECT) FINANCIAL AND NARRATIVE REPORTS ARE REQUIRED FROM PARTNERS AND USED TO REVIEW FINANCIAL PROGRESS THESE REPORTS ARE REVIEWED AND EVALUATED BY STAFF IN COUNTRY AS WELL AS BY HEADQUARTER STAFF

DRY CEREALS, FRUITS AND VEGETABLES, ETC - AGRO-ECOLOGICAL PRO DUCTION METHODS - CLIMATE CHANGE VULNERABILITY REDUCTION AND CAPACITY STRENGTHENING - MICR O ENTERPRISE SUPPORT - BASIC SERVICE PROVISION TO REFUGEES IN CAMPS - DISTRIBUTION OF IN-K IND MATERIAL RESOURCES INCLUDING, QUILTS, PERSONAL CARE KITS, SCHOOL KITS, BABY CARE KITS AND FABRIC KITS 3(2)(e) Specific Types of Services in South Asia - RIGHTS BASED WORK SOC IAL, ECONOMIC, CULTURAL AND POLITICAL, FIGHTING INJUSTICE, INEQUALITY AND DISCRIMINATION - LIVELIHOODS (PROMOTING INCOME GENERATION THROUGH TRAINING, MICRO ENTERPRISE SUPPORT AND O THER MEANS) -AGRICULTURE & FOOD SECURITY (INCORPORATING LANDWATER ACCESS, TRADE ENVIRONME NTAL ISSUES AND NATURAL RESOURCE MANAGEMENT, CLIMATE SMART AGRICULTURE, AGRICULTURE VALUE CHAIN) - WOMEN EMPOWERMENT - VULNERABILITY REDUCTION AND CAPACITY STRENGTHENING (FOR MARGI NALIZED AND FOR THOSE AFFECTED BY EMERGENCIES OR LIVING IN CRISIS ZONES, AS WELL AS CLIMAT E CHANGE ADAPTATION AND DISASTER RISK REDUCTION) - REHABILITATION AND RECONSTRUCTION FOR C OMMUNITIES IN HIGH RISK AREAS -DISTRIBUTION OF IN-KIND MATERIAL RESOURCES INCLUDING, QUIL TS, PERSONAL CARE KITS, SCHOOL KITS, BABY CARE KITS AND FABRIC KITS 3(3)(e) Specific Type s of Services in Central America/Caribbean - SMALL FARMERS' ACCESS TO LOCAL, REGIONAL AND INTERNATIONAL MARKETS PARTICULARLY IN THE COCOA & COFFEE SECTORS - AGRO-ECOLOGICAL PRODUCTION METHODS - VULNERABILITY REDUCTION AND RESILIENCE & CAPACITY STRENGTHENING - DISTRIBUT ION OF IN-KIND MATERIAL RESOURCES INCLUDING, QUILTS, PERSONAL CARE KITS, SCHOOL KITS, BABY CARE KITS AND FABRIC KITS 3(4)(e) Specific Types of Services in East Asia and the Pacific - LIVELIHOODS (PROMTING INCOME GENERATION THROUGH TRAINING, MICRO ENTERPRISE SUPPORT AN D OTHER MEANS - AGRICULTURE & FOOD SECURITY (INCORPORATING LANDWATER ACCESS, TRADE ENVIRON MENTAL ISSUES AND NATURAL RESOURCE MANAGEMENT, CLIMATE SMART AGRICULTURE, AGRICULTURE VALU E CHAIN) - VULNERABILITY REDUCTION AND CAPACITY STRENGTHENING (FOR MARGINALIZED AND FOR TH OSE AFFECTED BY EMERGENCIES OR LIVING IN CRISIS ZONES. AS WELL AS CLIMATE CHANGE ADAPTATIO N AND DISASTER RISK REDUCTION) -REHABILITATION AND RECONSTRUCTION FOR COMMUNITIES IN HIGH RISK AREAS - DISTRIBUTION OF IN-KIND MATERIAL RESOURCES INCLUDING, OUILTS, PERSONAL CARE KITS, SCHOOL KITS, BABY CARE KITS AND FABRIC KITS 3(5)(e) Specific Types of Services in Middle East and North Africa - VULNERABILITY REDUCTION FOR MARGINALIZED - LIVELIHOODS (PRO MOTING INCOME GENERATION THROUGH TRAINING. MICRO ENTERPRISE SUPPORT AND OTHER MEANS AND FOR THOSE AFFECTED BY EMERGENCIES OR LIVING IN CRISIS ZONES - DISTRIBUTION OF IN-KIND MATERI AL RESOURCES INCLUDING, QUILTS, PERSONAL CARE KITS, SCHOOL KITS, BABY CARE KITS AND FABRIC KITS 3(6)(e) Specific Types of Services in South America - SMALL FARMERS' ACCESS TO LOC AL. REGIONAL AND INTERNATIONAL MARKETS PARTICULARLY IN THE COCOA & COFFEE SECTORS - AGRO-E COLOGICAL PRODUCTION METHODS - COLLABORATION WITH MUNICIPAL GOVERNMENTS - PROMOTION OF

PEA CE AND CONFLICT RESOLUTION - CLIMATE CHANGE VULNERABILITY REDUCTION AND CAPACITY STRENGTHE NING

URCE MANAGEMENT, AGRICULTURAL PRODUCTION AND MARKETING INCLUDING VALUE CHAINS IN COMMODITI ES INCLUDING COFFEE, SESAME,

Return Reference	Explanation				
	1(1)(d) Purpose of Grant School Kits for Vulnerable Communities in Djibouti 1(1)(h) Description of Non-Cash Assistance school kits, personal care kits, quilts				

Return Reference	Explanation			
Schedule F, Part II, Line 1(2)(d)	1(2)(d) Purpose of Grant School Kits for LWR projects in Guatemala			

Return Reference	Explanation				
Schedule F, Part II, Line 1(3)(d)	1(3)(d) Purpose of Grant School kits for vulnerable children in Honduras				

## **Additional Data**

South Asia

## Software ID: Software Version:

**EIN:** 13-2574963

Name: Lutheran World Relief

See Part V

3,255,093

Form 990	Schedule F	Part T	- Activities	Outside	The United Stat	es

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Sub-Saharan Africa	14	17	Program Services	See Part V	10,330,627

19 Program Services

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Central America and the See Part V 2.780.983 74 Program Services 16 Caribbean See Part V 692,893 East Asia and the Pacific 16 Program Services

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) Middle East and North Africa See Part V 1.704.515 0 Program Services South America 17 Program Services See Part V 1,404,071

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Europe (Including Iceland and 0 |Program Services See Part V 430,000 Greenland) Russia and the Newly See Part V 1,360,780 0 Program Services Independent States

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) Sub-Saharan Africa 836.746 lInvestments South America Investments 18,998

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (e) If activity listed in (d) (d) Activities conducted (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region services, grants to service(s) in region region recipients located in the region) Europe (Including Iceland and 165.003 lInvestments Greenland)

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV. non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Central America See Part V 433,365 See Part V lFM∨ land the Caribbean Central America See Part V 204.000 School kits lFM∨ land the

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV. non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Central America See Part V 261,120 School Kits lFM∨ land the Caribbean Central America See Part V 725.150|See Part V lFM∨ land the

(i) Method of l(b) IRS codel (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of l (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) See Part V 223,125 School Kits lFM∨ Europe (Includina Iceland and Greenland)

See Part V 206,875|See Part V Europe

lFM∨

(Includina lIceland and Greenland)

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East See Part V 456,550|See Part V lFM∨ land North Africa Middle East See Part V 232,010 See Part V lFM∨ land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(ıf cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East and See Part V 397,680|See Part V IFMV North Africa Russia and the See Part V 188.080 School Kits **IFMV** Newly Independent

States

(I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(ıf cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Russia and the See Part V 747,000|See Part V IFMV Newly Independent States



- Russia and the

Newly Independent States

See Part V

Form 990 Schedule F Part II - Grants or Entities Outside The United States

425.700 See Part V

**IFMV** 

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of i (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(If organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) South America | See Part V 223,125 School Kits **IFMV** 



South America

See Part V

FMV

814.900 See Part V

(i) Method of l(b) IRS code l (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of ( (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if cash grant organization grant non-cash disbursement appraisal, assistance applicable) assistance other)

940,500 Quilts

|FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States

See Part V

South Asia

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash and EIN(if cash grant organization arant non-cash disbursement assistance appraisal. applicable) assistance other) South Asia See Part V 331,800 School Kits **IFMV** Sub-Saharan See Part V 1.333.382|See Part V **IFMV** Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash and EIN(If cash grant organization arant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan See Part V 1,104,710 See Part V **IFMV** Africa **IFMV** 

Sub-Saharan See Part V 226.796 See Part V

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan See Part V 1,183,950 See Part V **IFMV** Africa Sub-Saharan See Part V 30,096 Ouilts **IFMV** Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash and EIN(If cash grant organization arant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan See Part V 1,095,280 See Part V **IFMV** Africa Sub-Saharan See Part V 223,125 School Kits **IFMV** 

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan See Part V 460,980 See Part V **IFMV** Africa Sub-Saharan See Part V 108.675 See Part V **IFMV** 

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash and EIN(If cash grant organization arant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan See Part V 470,250 See Part V **IFMV** Africa

Sub-Saharan See Part V 218,945 School Kits **IFMV** 

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(If cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) Central America See Part V 205,549 Wire Trnsfr land the Carıbbean Central America See Part V 107.802 Wire Trnsfr land the

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(If cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) Central America See Part V 100,000 Wire Trnsfr land the Carıbbean Central America See Part V 98.546 Wire Trnsfr land the

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV. non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Central America See Part V 96,944 Wire Trnsfr land the Carıbbean Central America See Part V 90.358 Wire Trnsfr land the Carıbbean

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV. non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Central America See Part V 80,000 Wire Trnsfr land the Carıbbean Central America See Part V 67.861 Wire Trnsfr land the Carıbbean

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV. non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Central America See Part V 62,500 Wire Trnsfr land the Carıbbean Central America See Part V 58.711 Wire Trnsfr land the Carıbbean

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV. non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Central America See Part V 58,263 Wire Trnsfr land the Carıbbean Central America See Part V 43.088 Wire Trnsfr land the

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV. non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Central America See Part V 25,000 Wire Trnsfr land the Carıbbean Central America See Part V 23.282 Wire Trnsfr land the Carıbbean

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV. non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Central America See Part V 23,662 Wire Trsnfr land the Carıbbean Central America See Part V 16.782 Wire Trnsfr land the Carıbbean

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash íbook, FMV, cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and See Part V 205,305 Wire Trnsfr the Pacific

149.504 Wire Trnsfr

East Asia and

the Pacific

See Part V

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash íbook, FMV, cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and See Part V 146,660 Wire Trnsfr the Pacific

110.000 Wire Trnsfr

East Asia and

the Pacific

See Part V

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of i (a) Name of section (c) Region cash non-cash (book. FMV. and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) |East Asia and |See Part V 46,424 Wire Trnsfr Ithe Pacific East Asia and 35,000 Wire Trnsfr lEmergency Ithe Pacific Response

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East See Part V 203,638 Wire Trnsfr and North Africa Middle East See Part V 118.085 Wire Trnsfr and North

Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East See Part V 98,810 Wire Trnsfr land North Africa Middle East See Part V 92.579 Wire Trnsfr land North

Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East See Part V 75,000 Wire Trnsfr land North Africa Middle East See Part V 30.163 Wire Trnsfr land North

Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of l(b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(ıf organization grant cash grant non-cash disbursement appraisal, assistance applicable) assistance other) |South America | See Part V 128,767 Wire Trnsfr |South America |See Part V 67.933 Wire Trnsfr

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of l(b) IRS codel (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal. applicable) assistance other) South America Emergency 57,651 Wire Trnsfr Response South America |See Part V 36,000 Wire Trnsfr

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation |(d) Purpose of | (e) Amount of | (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(If organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) South America | See Part V 25,000 Wire Trnsfr

South America | See Part V 21.000 Wire Trnsfr

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation |(d) Purpose of | (e) Amount of | (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(If organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) South America | See Part V 21,000 Wire Trnsfr

10.000 Wire Trnsfr

South America | See Part V

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of l(b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(If organization grant cash grant non-cash disbursement appraisal, assistance applicable) assistance other) |South America | See Part V 8.000 Wire Trnsfr South Asia See Part V 209.434 Wire Trnsfr

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) South Asia See Part V 188,556 Wire Trnsfr

141,363 Wire Trnsfr

South Asia

See Part V

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) South Asia See Part V 129,976 Wire Trnsfr

127,199 Wire Trnsfr

South Asia

See Part V

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(ıf organization grant cash grant non-cash disbursement appraisal, assistance applicable) assistance other) South Asia See Part V 115,560 Wire Trnsfr South Asia Flood resilience 107,818 Wire Trnsfr

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code l (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) South Asia See Part V 86,591 Wire Trnsfr South Asia See Part V 86.059 Wire Trnsfr

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of i (a) Name of section (c) Region (book, FMV. cash non-cash and EIN(If organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) South Asia Flood resilience 86,002 Wire Trnsfr

80.724 Wire Trnsfr

South Asia

See Part V

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code l (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) South Asia See Part V 66,313 Wire Trnsfr South Asia See Part V 66,312 Wire Trnsfr

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of i (a) Name of section (c) Region (book, FMV. non-cash cash and EIN(If organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) South Asia Flood resilience 64,542 Wire Trnsfr South Asia Flood resilience 64,311 Wire Trnsfr

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of i (a) Name of section (c) Region (book, FMV. cash non-cash and EIN(If organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) South Asia Flood resilience 61,874 Wire Trnsfr South Asia See Part V 30.000 Wire Trnsfr

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of l (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(ıf organization grant cash grant non-cash disbursement appraisal, assistance applicable) assistance other) South Asia See Part V 25,244 Wire Trnsfr South Asia Flood Resilience 25.244 Wire Trnsfr

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of i (a) Name of section (c) Region (book, FMV. cash non-cash and EIN(If organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) South Asia See Part V 10.896 Wire Trnsfr

South Asia Flood resilience 10.000 Wire Trnsfr

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation ' (d) Purpose of l (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(If organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) South Asia |Flood resilience| 10,000 Wire Trnsfr Sub-Saharan See Part V 1.440.480 Wire Trnsfr Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan See Part V 520,016 Wire Trnsfr Africa Sub-Saharan See Part V 183,700 Wire Trnsfr Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan See Part V 172,092 Wire Trnsfr Africa Sub-Saharan See Part V 168.808 Wire Trnsfr Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Coffee farming 163,424 Wire Trnsfr Africa Sub-Saharan IUSAID GDA-152,540 Wire Trnsfr Africa Niaer

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan IUSAID GDA-127,810 Wire Trnsfr Africa Niaer Sub-Saharan See Part V 124,486 Wire Trnsfr Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan IUSAID GDA-116,425 Wire Trnsfr Africa Niaer Sub-Saharan See Part V 116.079 Wire Trnsfr Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan IUSAID GDA-103,525 Wire Trnsfr Africa Niaer Sub-Saharan See Part V 85.533 Wire Trnsfr Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash and EIN(If cash grant organization arant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan See Part V 78.676 Wire Trnsfr Africa Sub-Saharan See Part V 78.671 Wire Trnsfr Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (g) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan 76,150 Wire Trnsfr lmicrolAfrica Ibusinesses Sub-Saharan See Part V 44,899 Wire Trnsfr Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash and EIN(If cash grant organization arant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan See Part V 35,000 Wire Trnsfr Africa Sub-Saharan See Part V 31,465 Wire Trnsfr Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash and EIN(If cash grant organization arant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan See Part V 29,658 Wire Trnsfr Africa Sub-Saharan See Part V 25,000 Wire Trnsfr Africa

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As Filed Data -

DLN: 93493042005159

OMB No 1545-0047

## **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form990. Name of the organization **Employer identification number** Lutheran World Relief Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply ✓ Mail solicitations Solicitation of non-government grants ✓ Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events ✓ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ✓ Yes ☐ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (iii) Did (vi) Amount paid to (i) Name and address of individual (ii) Activity (iv) Gross receipts (v) Amount paid to

or entity (fundraiser)	(II) Activity	fundraiser have custody or control of contributions?		from activity	(or retained by) fundraiser listed in col (i)	(or retained by) organization	
		Yes	No				
1 Arıa 717 W ST GERMAIN STREET St Cloud, MN 56301	Telemark- eting		No	54,874	55,730	0	
2 Merkle 7001 COLUMBIA GATEWAY DRIVE Columbia, MD 21046	Direct Mail		No	5,311,236	453,946	4,857,290	
3 MP May 40 HARCOURT STREET San Rafael, CA 94901	Comb Fed Campaign		No	215,580	6,537	209,043	
4							
5							
6							
7							
8							
9							
10							
Total	•		<b>•</b>	5,581,690	516,213	5,066,333	
	nization is registere	d or licens		, ,	<u> </u>		

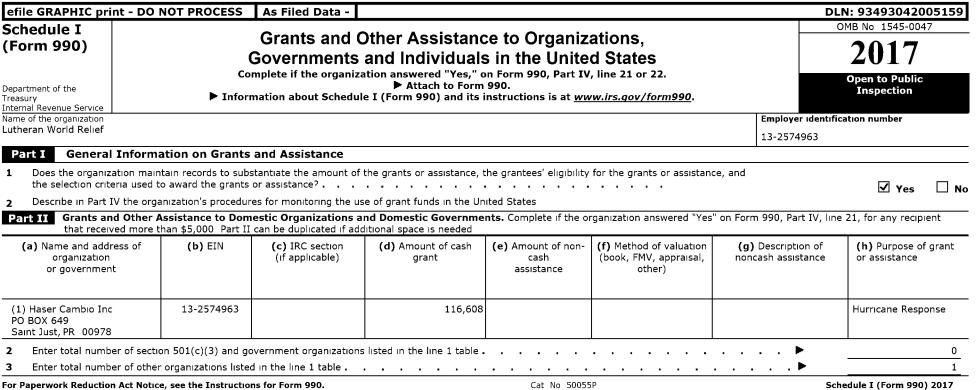
licensing

All States

Sche	edule G (Form 990 or 990-EZ) 2017				Page 2			
Pa	rt II Fundraising Events. Complethan \$15,000 of fundraising e	event contributions and						
	gross receipts greater than \$!	(a)Event #1	<b>(b)</b> Event #2	(c)Other events	(d) Total events			
		(event type)	(event type)	(total number)	(add col (a) through col (c))			
Revenue								
eve								
~	1 Gross receipts							
	2 Less Contributions							
	4 Cash prizes							
	5 Noncash prizes							
ses	6 Rent/facility costs							
Direct Expenses	7 Food and beverages							
ញិ អ	8 Entertainment							
elic	9 Other direct expenses							
_	10 Direct expense summary Add lines 4 t	through 9 in column (d)		· <b>.</b>				
	11 Net income summary Subtract line 10	) from line 3, column (d)		•				
Pai	<b>Gaming.</b> Complete if the organization on Form 990-EZ, line 6a.	anization answered "Ye	es" on Form 990, Part 1	IV, line 19, or reported	more than \$15,000			
Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))			
	1 Gross revenue							
Expenses	2 Cash prizes							
ă	3 Noncash prizes							
ect	4 Rent/facility costs							
<u>ā</u>	5 Other direct expenses							
		☐ Yes%	☐ Yes %	☐ Yes %				
	6 Volunteer labor	☐ No	☐ No	☐ No				
	7 Direct expense summary Add lines 2 through 5 in column (d)							
	8 Net gaming income summary Subtrac							
9	Enter the state(s) in which the organization conducts gaming activities							
a b	Is the organization licensed to conduct go If "No," explain	☐ Yes ☐ No						
10a b	Were any of the organization's gaming lid	☐ Yes ☐ No						
					l			

Sche	dule G (Form 990 or 990-EZ) 2017				F	Page <b>3</b>			
11	Does the organization conduct gaming	activities with nonmembers?		Yes	□No				
12	Is the organization a grantor, beneficial formed to administer charitable gaming	ry or trustee of a trust or a member of a partnership or other entity $\mathfrak{g}^2$	У	□Yes	□No				
13	Indicate the percentage of gaming acti	vity conducted in							
а	The organization's facility		13	a		%			
b	An outside facility		13	b		%			
14	Enter the name and address of the per	son who prepares the organization's gaming/special events books a	and record	S					
	Name ►								
	Address •								
15a	Does the organization have a contract revenue?	with a third party from whom the organization receives gaming		□Yes	□No				
Ь		evenue received by the organization ▶ \$a the third party ▶ \$	and the						
c	If "Yes," enter name and address of the	e third party							
	Name •								
	Address ►								
16	Gaming manager information								
	Name ►								
	Gaming manager compensation ► \$								
	Description of services provided ►								
	☐ Director/officer	☐ Employee ☐ Independent contractor							
17	Mandatory distributions								
а	Is the organization required under stat retain the state gaming license?	e law to make charitable distributions from the gaming proceeds to	•	☐Yes	Пио				
b									
Pai		on. Provide the explanations required by Part I, line 2b, col 5c, 16, and 17b, as applicable. Also provide any additional				s).			
	Return Reference	Explanation							

Schedule G (Form 990 or 990-EZ) 2017



Schedule I (Form 990) 2017  Part III Grants and Other A Part III can be duble	Assistance to	Domestic Individua onal space is needed	ıals. Complete if the orç	Janization answered "Yes	" on Form 990, Part IV, line 22	Page 2	
(a) Type of grant or assis		(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance	
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
Part IV Supplemental	ıl Informati	on. Provide the inf	formation required in	Part I, line 2; Part III	I, column (b); and any other add	ditional information.	
Return Reference	Explanati	Explanation					
SCHEDULE I, PART I, LINE 2	LIFE CYCLE FUNDING A MONITORIN	LWR PARTNER ORGANIZATIONS (SUB-GRANTEES) ARE PROVIDED TECHNICAL MANAGEMENT AND CAPACITY BUILDING SUPPORT BY LWR STAFF THROUGHOUT THE LIFE CYCLE OF THE GRANT PRE-AWARD ASSESSMENTS ARE CONDUCTED TO ASSESS OVERALL RISK (FINANCIAL SYSTEMS, TECHNICAL CAPACITY, TYPE/SIZE OF FUNDING AND EXPERIENCE WITH LWR, ETC ) ACTION PLANS, CAPACITY BUILDING AND MONITORING VISITS ARE PLANNED BASED ON RISK ASSESSMENT MONITORING IS DONE THROUGH A COMBINATION OF VERBAL AND SCHEDULED WRITTEN FINANCIAL AND PROGRAMMATIC REPORTS, AS WELL AS ON-SITE MONITORING VISITS DURING THE PROJECT FOR TECHNICAL SUPPORT AND VERIFICATION OF PROJECT ACTIVITIES ON-SITE MONITORING VISITS ARE ALSO					

MONITORING VISITS DURING THE PROJECT FOR TECHNICAL SUPPORT AND VERIFICATION OF PROJECT ACTIVITIES ON-SITE MONITORING VISITS ARE ALSO OCCASSIONALLY CONDUCTED BY US-BASED FINANCE AND PROGRAM STAFF QUARTERLY OR MONTHLY (DEPENDING ON THE PROJECT) FINANCIAL AND NARRATIVE REPORTS ARE REQUIRED FROM PARTNERS AND USED TO REVIEW FINANCIAL PROGRESS THESE REPORTS ARE REVIEWED AND EVALUATED BY STAFF IN COUNTRY AS

efil	e GRAPHIC pr	rint - DO NOT PROCESS	DLN: 9349	304	2005	159	
Schedule J (Form 990)		Compensation Information	ОМВ	No	1545-0	0047	
		For certain Officers, Directors, Trustees, Key Employees, and Highest					
		Compensated Employees  ► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		<b>2017</b>			
▶ Attach to Form 990.							
	tment of the Treasurv al Revenue Service	► Information about Schedule J (Form 990) and its instructions is at <u>www.irs.qov/form990</u> .			o Pul ectio		
	me of the organiza neran World Relief	ation Employer	identificatio	n nu	ımber		
Luti	ieran world Reliei	13-257496	3				
Pa	rt I Questi	ons Regarding Compensation					
			_		Yes	No	
1a		opiate box(es) if the organization provided any of the following to or for a person listed on Form section A, line 1a Complete Part III to provide any relevant information regarding these items					
		s or charter travel Housing allowance or residence for personal use					
	_	r companions $\square$ Payments for business use of personal residence	e				
		nification and gross-up payments  Health or social club dues or initiation fees Personal services (e.g., maid, chauffeur, chef)					
	□ Discretion	nary spending account					
b		xes in line 1a are checked, did the organization follow a written policy regarding payment or reim all of the expenses described above? If "No," complete Part III to explain		<b>1</b> b			
2		ation require substantiation prior to reimbursing or allowing expenses incurred by all		2			
	directors, truste	ees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?					
3		If any, of the following the filing organization used to establish the compensation of the					
		CEO/Executive Director Check all that apply Do not check any boxes for methods ed organization to establish compensation of the CEO/Executive Director, but explain in Part III					
	· ·	ation committee  Written employment contract  Compensation survey or study					
		of other organizations  Approval by the board or compensation commit	tee				
		, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organiz					
4	related organiza		ation or a				
а	Receive a sever	rance payment or change-of-control payment?		4a	Yes		
b		or receive payment from, a supplemental nonqualified retirement plan?		4b	Yes		
c	Participate in, o	r receive payment from, an equity-based compensation arrangement?		4c		No	
	If "Yes" to any o	of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III					
	Only 501(c)(3	s), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.					
5		ed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any					
	compensation co	contingent on the revenues of					
а	The organization	n <sup>?</sup>		5a		No	
b	Any related orga		L	5b		No	
	•	e 5a or 5b, describe in Part III					
6		ed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any contingent on the net earnings of					
а	The organization		_	6a		No	
b	Any related orga		_	6b		No_	
_	•	e 6a or 6b, describe in Part III					
7	payments not de	ed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed lescribed in lines 5 and 6? If "Yes," describe in Part III		7		No	
8		ints reported on Form 990, Part VII, paid or accured pursuant to a contract that was nitial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe					
			L	8		No	
9	If "Yes" on line 8 53 4958-6(c)?	8, did the organization also follow the rebuttable presumption procedure described in Regulations	section	9			
For I		uction Act Notice, see the Instructions for Form 990. Cat. No. 50053T . 5	chedule 1 (		990)	2017	

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

For each individual whose instructions, on row (ii)	o no	t list any individuals that	are not listed on Form 9	90, Part VII				
Note. The sum of column	s (B)							
(A) Name and Title		(B) Breakdown (i) Base compensation	of W-2 and/or 1099-MIS  (ii) Bonus & incentive compensation	C compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	<b>(D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
1 AMB DANIEL V SPECKHARD	(i)	288,499	0	9,960	62,158	4,500	365,117	0
RT PRESIDENT AND CEO	(ii)	0	0	0	0	0	0	0
2 MS JOANN THEYS VP FIN & ADMIN/TREAS	(i)	164,917	5,000	2,160	15,868	3,242	191,187	0
	(ii)	0	0	0	0	0	0	0
3 MR TIMOTHY MCCULLY SVP INTERNATIONAL	(i)	168,217	0	960	15,594	25,920	210,691	0
PROGRAMS	(ii)	0	0	0	0	0	0	0
4 MS WENDY ROTHENBERGER	(i)	154,357	0	960	14,199	9,846	179,362	0
VP, PRESIDENT'S OFFICE & HR	(ii)	0	0	0	0	0	0	0
<b>5</b> MS GERALDINE SICOLA VP, STRATEGIC PSHIPS &	(i)	153,175	0	960	14,048	9,308	177,491	0
EXT REL	(ii)	0	0	0	0	0	0	0
6 MR MICHAEL WATT VP INTERNATIONAL	(i)	144,395	0	960	13,195	9,246	167,796	0
OPERATIONS	(ii)	0	0	0	0	0	0	0
7 MR STOJGNIEW	(i)	95,734	0	49,125	13,610	27,520	185,989	0
STANISZEWSKI SR DIRECTOR OF TECHNOLOGY	(ii)	0	0	0	0	0	0	0
8 MR RICHARD SLACUM CHIEF OF PARTY - SESAME	(i)	117,578	0	25,575	6,582	9,409	159,144	0
	(ii)	0	0	0	0	0	0	0
							Calcadiol a	1 (Form 990) 2017

Schedule J (Form 990) 2017	Page <b>3</b>					
Part III Supplemental Inform	nation					
Provide the information, explanation, or	descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information					
Return Reference Explanation						
Return Reference	Explanation					
	Explanation  Staniszewski received severance pay of \$31,827 during 2017, which is reported under "other reportable compensation "					

Schedule J (Form 990) 2017

efi	le GRAPHIC print - DO NOT	PROCESS As	Filed Data -									DLN: 9	34930	4200	5159
Scl	hedule K	Ç	nnlomontal	Information o	a Tay E	vomr	3+ E	Panda				ОМВ	No 1545	5-0047	
(Fo	orm 990)	Su  ▶ Complete if the	ppiememai i e organization ans	Information OI wered "Yes" to Form	II I dX-E 990. Part I	V. line 2	JL E Va. I	DONUS Provide des	crintions.			7	201	7	
		, complete in the	explanations	, and any additional i	nformation				pa.o,					•	
	rtment of the Treasury nal Revenue Service	▶Informatio		Attach to Form 990 ( (Form 990) and its i		s is at w	ww.i	rs.gov/fori	n990.				en to Pu nspectio		
Name	e of the organization			· · · · · ·						Emplo	yer iden		n number		
Luth	eran World Relief									13-25	74963				
Pa	art I Bond Issues	_	_												
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(	( <b>f)</b> Description	on of purpose	e <b>(g)</b> De	efeased		On alf of	(i) fınar	Pool
												ISS		IIIIai	icing
										Yes	No	Yes	No	Yes	No
Α	MARYLAND ECONOMIC DEVELOPMENT CORPORATION	52-1376562	57420NOAV	07-26-2007	5,9	42,546	See P	art VI			X		X		X
Pa	rt III Proceeds	l									l				
						4		Е	3	С				D	
1	Amount of bonds retired					1,807,	500								
2	Amount of bonds legally defease						이								
3	Total proceeds of issue					5,942,	-+								
4_	Gross proceeds in reserve funds					476,	594								-
5	Capitalized interest from procee  Proceeds in refunding escrows.					F 020	605								
6 7	Issuance costs from proceeds .					5,828,6	-								
<del></del>	Credit enhancement from proce					113,8	0								
9	Working capital expenditures from						0								
10	Capital expenditures from proce						0								
11	Other spent proceeds						0								
12	Other unspent proceeds						0								
13	Year of substantial completion .						┪								
					Yes	No		Yes	No	Yes	No		Yes		No
14	Were the bonds issued as part o	of a current refunding	jissue?			Х									
15	Were the bonds issued as part of	of an advance refundi	ing issue?		Х										
16	Has the final allocation of proceed	eds been made? .			X										
17	Does the organization maintain proceeds?	adequate books and	records to support th	he final allocation of	Х										
Pai	rt IIII Private Business Us								-				*		
					1	4		В	3	C	•			D	
1	Was the organization a partner financed by tax-exempt bonds?	ın a partnershıp, or a	member of an LLC,	which owned property	Yes	No	$\dashv$	Yes	No	Yes	No		Yes		No
2	Are there any lease arrangemen property?	nts that may result in	private business use												
For	Panerwork Reduction Act Notice	ce see the Instruct	tions for Form 990		Cal	No 501	193E				S	chadul	K (For	m 990	1) 2017

Page 2

C

No

Yes

Schedule K (Form 990) 2017

No

Yes

Α

No

Χ

Χ

Х

Χ

Х

Yes

No

Yes

Χ

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Penalty in Lieu of Arbitrage Rebate? . . . If "No" to line 1, did the following apply? . . . .

Rebate not due yet? . . . . . . .

Exception to rebate? . . . . . . .

No rebate due? . . . . . . . . .

hedge with respect to the bond issue?

If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed . . . . . . Is the bond issue a variable rate issue? . . . . .

Was the hedge superintegrated? . . . . . . 

C

Page 3

No

No

D

Yes

Yes

No

Yes

Χ

Х

Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

A(F) Description of Purpose Advance Refunding of Series 2000 Revenue Bonds

Explanation

Yes

Χ

No

Yes

No

No

Yes

No

Schedule K (Form 990) 2017

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

the GIC satisfied? . . . . . . . . .

requirements of section 148? . . .

(GIC)?

period?

Part V

Part VI

(F)

Return Reference

SCHEDULE K, PART I, LINE A

,			
		4	
	Yes	No	,
Were gross proceeds invested in a quaranteed investment contract		.,	

SCHEDULE K, PART I, LINE A EACH HAS RECORDED 50% OF THE OUTSTANDING DEBT AND RELATED ISSUE COSTS ON THE FINANCIAL	Return Reference	Explanation
STATEMENTS 100% OF THE LIABILITY AND RELATED COSTS ARE REPORTED ON SCHEDULE K	SCHEDULE K, PART I, LINE A	UNRELATED 501(C)(3) ORGANIZATION, ARE JOINTLY AND SEVERALLY LIABLE FOR THE 2007 BONDS AND AS SUCH,

Return Reference	Explanation
CHEDULE K, PART IV, LINE	THE REBATE COMPUTATION WAS PERFORMED ON JUNE 30, 2017

SC

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493042005159 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) 2017 ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990 Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** Lutheran World Relief 13-2574963 Part I **Types of Property** (b) (c) (d) (a) Method of determining Check if Number of contributions or Noncash contribution applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Art-Historical treasures Art—Fractional interests Books and publications Clothing and household goods . . . . . Cars and other vehicles Boats and planes . . Intellectual property . . Χ 431,996 FMV Securities—Publicly traded . 10 Securities—Closely held stock . Securities—Partnership, LLC, or trust interests . . . . 12 Securities—Miscellaneous . Qualified conservation contribution—Historic structures . . . . 14 Qualified conservation contribution—Other . Real estate—Residential . 15 Real estate—Commercial . 17 Real estate—Other . . 18 Collectibles . . . . 19 Food inventory . . . 20 Drugs and medical supplies . Taxidermy . . . . . 21 22 Historical artifacts . 23 Scientific specimens . 24 Archeological artifacts . . Other ▶ ( Χ 737,212 13,384,948 FMV 25 Material Res 26 Other ▶ (\_ 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a Νo **b** If "Yes," describe the arrangement in Part II 31 Yes Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 32a Yes b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II Schedule M (Form 990) (2017) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

Schedule M (Form 990) (2017)

Page 2

stock gifts as it may be incorrectly construed as providing tax advice to the donor. Please see the Associate
Vice-President for Finance and Administration with any questions regarding stock donations

Schedule M (Form 990) (2017)

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 9349									
SCHEDUL (Form 990 or EZ)	r 990- Freasury	Complete to pro Form 990 o Information about	vide information fo r 990-EZ or to prov ▶ Attach to Form Schedule O (Form	ation to Form 990 or 990-EZ on for responses to specific questions on provide any additional information. Form 990 or 990-EZ) and its instructions is at irs.gov/form990.  OMB No 154.  2017 Open to Publics.gov/form990.					
Name of the org Lutheran World Re	Employer identif	ication number							
Return Reference				Explanation					
Form 990, Part III, Line 4d	TO PULUTHE SELLIN R AND OF \$ 3 ISCAL VERTY BUILD DONE ELIVER OCIAL BLISHITO EN ILE PR	T FAITH INTO ACTION BY HERANS ENGAGED WITH LWING COFFEE, CHOCOLATE ASMALLHOLDER FARMERS', 1924 REVENUE \$ 0 IMPACTYEAR 2018 THROUGH THIS YEAR 2018, INCREASE RESILIBY THE ESTABLISHMENT, SR NEEDED GOODS AND SEIMPACT AND VALUE FOR INTESTEE EN GAGE IN SMALL SCALE TRA	ELPING NEIGHBOR R BY MAKING QUILT ND ECO-PALMS, AN VALUE IN SUPPLY INVESTING LWR E S ENTERPRISE-BAS THEIR HOUSEHOL ENCE AND ULTIMA RVIES IN A COMMEI MPOVERISHED COM TERPRISE - A WHO ADE IN FAIR TRADE ERS WHICH ARE MO	RKS WITH LUTHERAN CONGR S IN NEED OVERSEAS IN THE S AND KITS FOR OVERSEAS IN THE S AND KITS FOR OVERSEAS IN EXPENSES \$ 1,561,56 BEGAN ITS IMPACT INVESTING ED APPROACH TO DEVELOPED AND COMMUNITIES TO SUBJECT OF THE STATE OF THE STATE OF THE STATE OWNED TO THE STATE OWNED COFFEE PRODUCT, ORGANIC, AND RAIN FOREST ORE FAVORABLE THAN OTHER	E 2018 FISCAL YE, DISTRIBUTION, BI LAISE AWARENES 90 INCLUDING GI GENT, LWR WILL I USTAIN AND RAIS SINESSES THAT SI LER AND CREATE LEAR 2018, LWR H CTION COMPANY T ALLIANCE COFF	AR, UYING AND S OF HUNGE RANTS ING F REDUCE PO E INCOMES, FHIS IS SEEK TO D POSITIVE S IAD ESTA IN UGANDA FEE WH			

Return Explanation
Reference

Form 990,	List of Forlegn Countries NICARAGUA, PERU, COLOMBIA, BURKINA FASO, MALI, NIGER, KENYA, UG
Part V, Line	ANDA, TANŽANIA, INDIA, NEPAL, PHILIPPINES, INDONESIA, EL SALVADOR

Return Explanation
Reference

990 Schedule O, Supplemental Information

Form 990,
Part VI,
Section B,
Line 11b

The PROCESS FOR BOARD REVIEW OF THE ANNUAL FORM 990 IS OUTLINED IN LWR'S BOARD POLICY AS F
OLLOWS PRIOR TO LWR'S ANNUAL SUBMISSION OF IRS FORM 990, EACH BOARD MEMBER SHALL RECEIVE
A COPY OF THE FORM AS COMPLETED BY LWR'S CERTIFIED PUBLIC ACCOUNTANTS BOARD MEMBERS SHALL
HAVE AT LEAST FIVE BUSINESS DAYS TO REVIEW THE FORM AND RAISE QUESTIONS, MAKE SUGGESTIONS
, AND BRING ANY POTENTIAL PROBLEMS OR CONCERNS TO THE CHAIR OF THE AUDIT AND RISK COMMITTE

E

Return Reference	Explanation
Form 990, Part VI, Section B, Line 12c	LWR'S CONFLICT OF INTEREST POLICY (APPLICABLE TO BOARD OF DIRECTORS AND ALL EMPLOYEES) STA TES THAT A CONFLICT OF INTEREST EXISTS WHENEVER THERE IS A PROPOSED AGENCY TRANSACTION IN WHICH A DIRECTOR, OFFICER, OR STAFF MEMBER HAS ANY ACTUAL OR POTENTIAL INVOLVEMENT, INTERE ST, OR RELATIONSHIP, EITHER DIRECTLY OR INDIRECTLY IN ADDITION, A CONFLICT OF INTEREST MAY ALSO EXIST WHEN THE INTERESTS OR CONCERNS OF AN EMPLOYEE, OR SUCH EMPLOYEE'S IMMEDIATE FOR AMILY, OR ANY PARTY, GROUP OR ORGANIZATION TO WHICH SUCH PERSON HAS ALLEGIANCE, MAY BE SEE NOW AS COMPETING WITH THE INTERESTS OR CONCERNS OF THE AGENCY EACH EMPLOYEE HAS ADOLTY TO DOLOGIC TO THE PRESIDENT THE MATERIAL FACTS OF ANY PROPOSED TRANSACTION OF THE AGENCY IN WORLD HICH SUCH PERSON HAS ANY ACTUAL OR POTENTIAL CONFLICT OF INTEREST THE REQUIRED DISCLOSURE MUST BE MADE PRIOR TO ANY CONSIDERATION OF SUCH PROPOSED TRANSACTION BY THE AGENCY AN EMPLOYEE OR BOARD MEMBER HAVING AN ACTUAL OR PROPOSED CONFLICT OF INTEREST SHALL NOT PARTICITY PATE IN THE DELIBERATIONS OR DECISION-MAKING PROCESS OF THE AGENCY REGARDING THE MATTER UNDER CONSIDERATION HOWEVER, HE OR SHE SHALL PROVIDE THE AGENCY WITH ANY AND ALL RELEVANT INFORMATION REGARDING THE MATTER THE PRESIDENT SHALL TAKE SUCH ADDITIONAL ACTION AS MAY BE REQUIRED TO ENSURE THAT THE CONFLICT OF INTEREST IS RESOLVED, AND SHALL MAINTAIN A RECORD

Return Reference	Explanation
Form 990, Part VI, Section B, Line 15a	DETERMINATION OF PRESIDENT'S COMPENSATION AN INDEPENDENT COMPENSATION CONSULTANT PERFORMS AN ANALYSIS ANNUALLY USING INDEPENDENT RESEARCH WHICH CONSIDERS THE ORGANIZATION'S CURREN T BUDGET, THE CURRENT SALARY OF THE PRESIDENT, AND THE NUMBER OF YEARS THE PRESIDENT HAS S ERVED IN THAT POSITION THE ANALYSIS IS BASED ON VARIOUS SALARY SURVEYS TO PROVIDE A SALAR Y RANGE COMPETITIVE WITH OTHER SIMILARLY SITUATED NONPROFITS IN THE GEOGRAPHICAL AREA THE RESULTING FINDINGS ARE PROVIDED TO THE BOARD OF DIRECTORS OFFICERS, WHO REVIEWS THE FINDI NGS AND MAKES A RECOMMENDATION TO THE FULL BOARD FOR THEIR APPROVAL REGARDING THE PRESIDEN T'S COMPENSATION FOR THE COMING YEAR COMPENSATION OF ALL OTHER STAFF(INCLUDING OTHER OFFICERS) IN 2018 THE EXTERNAL COMPENSATION CONSULTANT CONDUCTED AN ANALYSIS OF EACH VPS SALA RY FOLLOWING THE SAME METHODOLOGY THAT WAS USED FOR THE PRESIDENT AND CEO THE FINDINGS OF THIS ANALYSIS WERE SHARED WITH THE PRESIDENT AND CEO, WHO MADE DETERMINATIONS REGARDING S ALARY INCREASES FOR VPS SALARY ADJUSTMENTS FOR ALL LWR STAFF ARE GUIDED BY A SALARY ADMIN ISTRATION POLICY DEVELOPED BY LWR THE OBJECTIVE OF THIS POLICY IS TO ENSURE THAT SALARIES ARE COMMENSURATE WITH COMPARABLE ORGANIZATIONS IN THE COMPETITIVE LABOR MARKET AND THAT SALARY GRADES REFLECT THE RELATIVE INTERNAL RESPONSIBILITY, ACCOUNTABILITY AND KNOW-HOW OF ALL POSITIONS ACROSS THE ORGANIZATION EVERY JOB DESCRIPTION IS PERIODICALLY REVIEWED TO D ETERMINE THE APPROPRIATE SALARY RANGE FOR ALL POSITIONS, SALARY RANGES ARE INTENDED TO REI INFORCE CAREER GROWTH, CONSIDER MARKET VALUES, AND ARE MANAGED IN AN EQUITABLE MANNER CONSI STENT WITH ORGANIZATIONAL VALUES THE SALARY RANGES ARE ADJUSTED EVERY TWO YEARS BASED ON AN ANALYSIS CONDUCTED BY AN EXTERNAL COMPENSATION CONSULTANT TO ENSURE THAT SALARY RANGES REMAIN COMPETITIVE WITH THE LOCAL LABOR MARKET

990 Schedule O, Supplemental Information

Return Explanation

Reference

Form 990, Part VI, Section C, Line 19

AS REQUIRED BY BOARD POLICY, THE ORGANIZATION MAKES AVAILABLE TO THE PUBLIC IT'S AUDITED F INANCIAL STATEMENTS, IRS FORM 990, A LIST OF CURRENT BOARD MEMBERS, CONFLICT OF INTEREST P OLICY AND OTHER INFORMATION THAT MAY BE HELPFUL TO THE PUBLIC IN UNDERSTANDING THE ORGANIZ ATION'S PURPOSES, GOALS, ACTIVITIES, AND RESULTS THIS INFORMATION IS AVAILABLE EITHER THR OUGH LWR'S WEBSITE (LWR ORG), VARIOUS CHARITY MONITORING WEBSITES, OR UPON REQUEST FOR THE SAME PERIOD OF DISCLOSURE AS SET FORTH IN SECTION 6104(D)

Return Explanation

Reference	
Form 990,	PROGRAM INPUTS - EXPENSES INCURRED BY LWR THAT DIRECTLY SUPPORT PARTNER PROJECT IMPLEMENTATION,
Dod IV Line	E C CEEDS ACDICULTURAL FOLIDMENT ETC

Part IX, Line TE G SEEDS, AGRICULTURAL EQUIPMENT, ETC

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493042005159 OMB No 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships** (Form 990) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization Employer identification number Lutheran World Relief 13-2574963 Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (c) (d) (e) (f) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity (1) Ground Up Investing LLC DE See Part VII 17,722 34,537 See Part VII C/O THE CORPORATION TRUST COMPANY WILMINGTON, DE 19801 82-1406539 (2) Mountain Harvest SMC Ltd UG 437,613 See Part VII See Part VII 736,126 PO Box 22892 Kampala 98-1398811

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (g) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No (1)LUTHERAN CENTER CORPORATION See Part VII MD 501(c)(3) 12A. I See Part VII 700 LIGHT STREET BALTIMORE, MD 21230 52-2055143 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50135Y Schedule R (Form 990) 2017

		(b)														
(a) Name, address, and EIN of related organization			(c) Legal domicile (state or foreign country)	(d) Direc control entit	t Pre ling incor y ur excl	(e) cdominant me(related, nrelated, uded from ax under tions 512- 514)	(f) Share of total income		Disprop	1) rtionate tions?	Code amour 20 Sched	(i) V-UBI nt in box O of Jule K-1 n 1065)	(j Gene mana part	ral or aging	(k) Percen owner	itage
						514)			Yes	No			Yes	No		
Part IV Identification of Related Org	ganizations Taxable as a C	Cornoration	T	+ Cana	1-1- 611				ll on E	- · · · · ·	00 0	art IV	line	34		
because it flad offe of fillore felt	ated organizations treated as						zation ans	werea "Yes	on F	orm 9	90, P	aiciv,	IIIIC	J 1		
(a)  Name, address, and EIN of related organization		a corporatio		st durir		olling Typ	(e) e of entity orp, S corp, or trust)	(f) Share of total	Share	(g) e of end- year assets		(h Percer owner	r) ntage	Se	(ı) ection 5 l3) cont entity	rolled
(a) Name, address, and EIN of related organization	(b) Primary activity	a corporatio	n or tru (c) egal micile or foreign untry)	st durir	g the tax (d) Direct contro entity	olling Typ	(e) le of entity orp, S corp,	<b>(f)</b> Share of total Income	Share	(g) e of end- year	-of-	(h Percer owner	r) ntage	Se (1	entity Yes	rolled y? <b>No</b>
(a) Name, address, and EIN of	ated organizations treated as (b)	a corporatio	n or tru (c) egal micile or foreign	st durir	g the tax (d) Direct contro	olling Typ	(e) le of entity orp, S corp,	<b>(f)</b> Share of total Income	Share	(g) e of end- year		(h Percer	r) ntage	Se (1	entity Yes	rolled y?
(a) Name, address, and EIN of related organization	(b) Primary activity	a corporatio	n or tru (c) egal micile or foreign untry)	st durir	g the tax (d) Direct contro entity	olling Typ	(e) le of entity orp, S corp,	(f) Share of total Income	Share	(g) e of end- year	-of-	(h Percer owner	r) ntage	Se (1	entity Yes	rolled y? <b>No</b>
(a)  Name, address, and EIN of related organization  (1)Charitable Gift Annuity (5)	(b) Primary activity  Investment	a corporatio	n or tru (c) egal micile or foreign untry)	st durir	ng the tax  (d)  Direct contro  entity	olling Typ	(e) le of entity orp, S corp,	(f) Share of total Income	Share	(g) e of end- year	-of- 0	(h Percer owner	r) ntage	Se (1	entity Yes	No No
(a)  Name, address, and EIN of related organization  (1)Charitable Gift Annuity (5)	(b) Primary activity  Investment	a corporatio	n or tru (c) egal micile or foreign untry)	st durir	ng the tax  (d)  Direct contro  entity	olling Typ	(e) le of entity orp, S corp,	(f) Share of total Income	Share	(g) e of end- year	-of- 0	(h Percer owner	r) ntage	Se (1	entity Yes	No No
(a)  Name, address, and EIN of related organization  (1)Charitable Gift Annuity (5)	(b) Primary activity  Investment	a corporatio	n or tru (c) egal micile or foreign untry)	st durir	ng the tax  (d)  Direct contro  entity	olling Typ	(e) le of entity orp, S corp,	(f) Share of total Income	Share	(g) e of end- year	-of- 0	(h Percer owner	r) ntage	Se (1	entity Yes	No No
(a)  Name, address, and EIN of related organization  (1)Charitable Gift Annuity (5)	(b) Primary activity  Investment	a corporatio	n or tru (c) egal micile or foreign untry)	st durir	ng the tax  (d)  Direct contro  entity	olling Typ	(e) le of entity orp, S corp,	(f) Share of total Income	Share	(g) e of end- year	-of- 0	(h Percer owner	r) ntage	Se (1	entity Yes	rolled y? <b>No</b> No
(a)  Name, address, and EIN of related organization  (1)Charitable Gift Annuity (5)	(b) Primary activity  Investment	a corporatio	n or tru (c) egal micile or foreign untry)	st durir	ng the tax  (d)  Direct contro  entity	olling Typ	(e) le of entity orp, S corp,	(f) Share of total Income	Share	(g) e of end- year	-of- 0	(h Percer owner	r) ntage	Se (1	entity Yes	rolled y? <b>No</b> No

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s).

(a)
Name of related organization

o Sharing of paid employees with related organization(s) . . . . . . . . . . . .

Reimbursement paid to related organization(s) for expenses .

Reimbursement paid by related organization(s) for expenses .

r Other transfer of cash or property to related organization(s) .

(1)Lutheran Center Corporation

(2)Lutheran Center Corporation

(3)Lutheran Center Corporation

Schedule R (Form 990) 2017							
Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.							
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No				
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?							
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	. 🦪	1a	No				
<b>b</b> Gift, grant, or capital contribution to related organization(s)	্ ু	1b	No				
c Gift, grant, or capital contribution from related organization(s)		1c	No				
<b>d</b> Loans or loan guarantees to or for related organization(s)	<u> </u>	1d	No				
e Loans or loan guarantees by related organization(s)	1	1e	No				
f Dividends from related organization(s)		1f	No				
g Sale of assets to related organization(s)	<u> </u>	1g	No				
h Purchase of assets from related organization(s)	1	1h	No				
i Exchange of assets with related organization(s)	·	1i	No				
j Lease of facilities, equipment, or other assets to related organization(s)	Ţ	1j	No				
k Lease of facilities, equipment, or other assets from related organization(s)		1k Yes	$\vdash$				
l Performance of services or membership or fundraising solicitations for related organization(s)		11	No				
m Performance of services or membership or fundraising solicitations by related organization(s)	<u> </u>	1m	No				

(b)

Transaction

type (a-s)

Q

(c)

Amount involved

537,226

108,803

15

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

1n

10

|1p | Yes

1q

1r

1s

Schedule R (Form 990) 2017

(d)

Method of determining amount involved

Lease agreement

Actual cost

ACTUAL COST

Yes

No

No

No

No

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

vas not a related organization. See instructions regarding execusion for certain investment partnerships														
<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) e all partners section 501(c)(3) ganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) f Disproprtionate allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership	
			514)	Yes	No			Yes	No		Yes	No		
										Schedul	e R (Forn	1 99	0) 2017	

Schedule R (Form 990) 2017 Page **5** Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Return Reference Explanation Schedule R, Part I, Columns (b) & (f) (a) Name of Disregarded Entity Ground Up Investing, LLC (b) Primary Activity Reduce poverty through an enterprise based development approach (f) Direct Controling Entity Lutheran World Relief (a) Name of Disregarded Entity Mountain Harvest, SMC Ltd (b) Primary Activity Buying coffee from local farmers, processing it and then exporting the coffee (f) Direct Controling Entity Ground Up Investing, LLC

Return Reference	Explanation
Schedule R, Part II, Line (1) (b) & (f)	(1)(b) Maintain and operate the Lutheran Center in Baltimore, MD (1)(f) Lutheran World Relief

Schedule R (Form 990) 2017