

2949306007019 0

13496
Form 990

CHANGE OF ACCOUNTING PERIOD

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service13496
509

2019

Open to Public
InspectionUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
► Do not enter social security numbers on this form as it may be made public.
► Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2019 calendar year, or tax year beginning FEB 1, 2019 and ending AUG 31, 2019

B Check if applicable	C Name of organization LUTHERAN ASSOCIATION OF MISSIONARIES AND PILOTS U.S.		D Employer identification number 39-1509253
<input type="checkbox"/> Address change	Doing business as LUTHERAN INDIAN MINISTRIES		E Telephone number 262-783-5267
<input type="checkbox"/> Name change	Number and street (or P.O. box if mail is not delivered to street address) 15400 W CAPITOL DR	Room/suite 201	G Gross receipts \$ 1,335,846.
<input type="checkbox"/> Initial return	City or town, state or province, country, and ZIP or foreign postal code BROOKFIELD, WI 53005-2661		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Final return/terminated	F Name and address of principal officer PAUL FLAA SAME AS C ABOVE		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)
<input type="checkbox"/> Amended return	I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)() (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ►
<input type="checkbox"/> Application pending	J Website: ► WWW.LUTHERANINDIANMINISTRIES.ORG		K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ► L Year of formation: 1985 M State of legal domicile: WI

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities LUTHERAN INDIAN MINISTRIES PROCLAIMS THE GOSPEL OF JESUS CHRIST WITH NATIVE AMERICAN PEOPLES,			
	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets			
	3 Number of voting members of the governing body (Part VI, line 1a)	3	8	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	8	
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	0	
	6 Total number of volunteers (estimate if necessary)	6	25	
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.	
b Net unrelated business taxable income from Form 990-T, line 39	7b	0.		
Revenue	8 Contributions and grants (Part VIII, line 1h)	2,072,343.	890,049.	
	9 Program service revenue (Part VIII, line 2g)	0.	442,262.	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,372.	-369.	
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,180.	3,050.	
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,077,895.	1,334,992.	
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	54,000.	20,475.	
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.	
Expenses	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,319,082.	860,428.	
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.	
	b Total fundraising expenses (Part IX, column (D), line 25) ► 227,392.	852,626.	535,813.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,225,708.	1,416,716.	
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	-147,813.	-81,724.	
	19 Revenue less expenses Subtract line 18 from line 12	Beginning of Current Year	End of Year	
	20 Total assets (Part X, line 16)	2,064,652.	2,037,996.	
21 Total liabilities (Part X, line 26)	109,725.	164,793.		
22 Net assets or fund balances Subtract line 21 from line 20	1,954,927.	1,873,203.		

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	► Signature of officer PAUL FLAA, CFO	Date 1/8/2020
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name JASON WRASSE	Preparer's signature 	Date 1-8-2020	Check <input type="checkbox"/> if self-employed	PTIN P01455199
	Firm's name ► REILLY, PENNER & BENTON LLP		Firm's EIN ► 39-0747409		
	Firm's address ► 1233 NORTH MAYFAIR ROAD, SUITE 302 MILWAUKEE, WI 53226-3255		Phone no. (414) 271-7800		

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

 Yes No

932001 12-04-19 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2019)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

LUTHERAN ASSOCIATION OF MISSIONARIES AND
PILOTS U.S.

Form 990 (2019)

39-1509253 Page 2

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

LUTHERAN INDIAN MINISTRIES PROCLAIMS THE GOSPEL OF JESUS CHRIST WITH NATIVE AMERICAN PEOPLES, DISCIPLES NATIVE LEADERS TO SHARE THE GOSPEL WITH THEIR BROTHERS AND SISTERS, AND PROVIDES RESOURCES TO ASSIST IN THE HEALING OF SOCIAL SUFFERINGS WHILE VALUING NATIVE CULTURES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses
Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code _____) (Expenses \$ 415,750. including grants of \$ 8,190.) (Revenue \$ 176,905.)

PASTORAL CARE: AT LUTHERAN INDIAN MINISTRIES WE PROCLAIM, DISCIPLE, AND HEAL. BUT OFTEN IN NATIVE MINISTRY, WE HAVE TO FLIP THAT SEQUENCE AND FOCUS ON THE HEALING FIRST. CHRISTIANS KNOW THE HEALING POWER OF THE GOSPEL AND HAVE MET PEOPLE WHOSE LIVES HAVE BEEN DRAMATICALLY CHANGED BY THE POWER OF THE HOLY SPIRIT. BUT IN MUCH OF INDIAN COUNTRY, THE HERO OF THE GOSPEL, JESUS CHRIST, HIMSELF, IS SEEN AS THE VILLAIN. FOR MORE THAN 500 YEARS, MISSIONARIES HAVE FORCE FED NATIVE PEOPLES FALSE TEACHINGS, THE GOSPEL MANIPULATED BY THOSE CLAIMING TO BE GOD'S WORKERS. THE CHALLENGE FOR OUR MINISTRY IS NOT THAT NATIVE AMERICANS DON'T KNOW JESUS. IT'S THAT THEY DON'T KNOW THE REAL JESUS. BECAUSE OF THIS, OUR STAFF MUST FIRST ASSIST IN THE HEALING OF THOSE ATROCITIES, SHOWING THEM THE TRUE LOVE OF CHRIST, BEFORE THEIR HEARTS

4b (Code _____) (Expenses \$ 311,813. including grants of \$ 6,142.) (Revenue \$ 132,679.)

HEALING MINISTRY: OFTEN, BEFORE NATIVE PEOPLE CAN PUT ON THE FULL ARMOR OF CHRIST, THEY MUST REMOVE THE CLOAK OF PAIN AND DARKNESS OF THEIR PAST. THROUGH A VARIETY OF PROGRAMS, LIM ASSISTS IN THE HEALING OF THIS PAIN. THROUGH PHYSICAL AND EMOTIONAL HEALING, AND BY THE WORK OF THE HOLY SPIRIT, THEIR HEARTS CAN BE OPENED TO THE HEALING MESSAGE OF JESUS CHRIST.

4c (Code _____) (Expenses \$ 259,844. including grants of \$ 5,119.) (Revenue \$ 110,566.)

YOUTH/CAMPUS MINISTRY: YOUTH ARE THE FUTURE IN ALL CULTURES AND THAT IS TRUE FOR NATIVE AMERICANS AS WELL. NATIVE YOUTH HAVE PARTICULAR CHALLENGES RESULTING FROM GENERATIONAL TRAUMA. LIM ADDRESSES YOUTH IN ALL OF OUR LOCATIONS THROUGH VACATION BIBLE SCHOOL, YOUTH GROUPS ACTIVITIES AND CAMPS THAT BLEND LIFE SKILLS, PROVIDE COUNSELING AND PROCLAIM JESUS AS THE ONE TRUE HEALER. IN LAWRENCE, KS, LIM OPERATES A CAMPUS MINISTRY ADJACENT TO HASKELL INDIAN NATIONS UNIVERSITY. WITH A STUDENT BASE OF AROUND 900 NATIVE STUDENTS EACH SEMESTER, LIM HAS OPPORTUNITY TO DAILY COUNSEL AND MENTOR STUDENTS WHILE SHOWING THEM THE TRUE LOVE OF JESUS.

4d Other program services (Describe on Schedule O)

(Expenses \$ 51,969. including grants of \$ 1,024.) (Revenue \$ 22,112.)

4e Total program service expenses ► 1,039,376.

Form 990 (2019)

**LUTHERAN ASSOCIATION OF MISSIONARIES AND
PILOTS U.S.**

Form 990 (2019)

39-1509253

BADFO
Page 3

Part IV Checklist of Required Schedules

- 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?
If "Yes," complete Schedule A
- 2 Is the organization required to complete *Schedule B, Schedule of Contributors*?
- 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*
- 4 **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*
- 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*
- 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*
- 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*
- 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*
- 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*
- 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? *If "Yes," complete Schedule D, Part V*
- 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable
 - a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*
 - b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*
 - c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*
 - d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*
 - e Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*
 - f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*
- 12a Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*
 - b Was the organization included in consolidated, independent audited financial statements for the tax year?
If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional
- 13 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?
 - 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*
 - 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*
 - 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*
 - 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*
 - 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*
 - 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*
 - 20a Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*
 - b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?
 - 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*

	Yes	No
1	X	
2	X	
3		X
4		X
5		X
6		X
7		X
8		X
9		X
10		X
11a	X	
11b		X
11c		X
11d		X
11e	X	
11f	X	
12a	X	
12b		X
13		X
14a		X
14b	X	
15	X	
16		X
17		X
18		X
19		X
20a		X
20b		
21		X

**LUTHERAN ASSOCIATION OF MISSIONARIES AND
PILOTS U.S.**

Form 990 (2019)

39-1509253 Page 4

Part IV Checklist of Required Schedules (continued)

	Yes	No
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	X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
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	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 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	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	X
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	X

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0
 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0
 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X

**LUTHERAN ASSOCIATION OF MISSIONARIES AND
PILOTS U.S.**

Form 990 (2019)

39-1509253 Page 5

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

	Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	0
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</i>	2b	<input checked="" type="checkbox"/>
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<input type="checkbox"/>
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	<input type="checkbox"/>
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	<input checked="" type="checkbox"/>
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).	5a	<input type="checkbox"/>
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b	<input checked="" type="checkbox"/>
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c	<input type="checkbox"/>
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	6a	<input type="checkbox"/>
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6b	<input type="checkbox"/>
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	7a	<input checked="" type="checkbox"/>
7 Organizations that may receive deductible contributions under section 170(c).	7b	<input type="checkbox"/>
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7c	<input type="checkbox"/>
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7d	<input type="checkbox"/>
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7e	<input checked="" type="checkbox"/>
d If "Yes," indicate the number of Forms 8282 filed during the year	7f	<input checked="" type="checkbox"/>
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7g	<input checked="" type="checkbox"/>
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7h	<input checked="" type="checkbox"/>
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	8	<input type="checkbox"/>
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	9a	<input type="checkbox"/>
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?	9b	<input type="checkbox"/>
9 Sponsoring organizations maintaining donor advised funds.	10a	<input type="checkbox"/>
a Did the sponsoring organization make any taxable distributions under section 4966?	10b	<input type="checkbox"/>
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	11a	<input type="checkbox"/>
10 Section 501(c)(7) organizations. Enter	11b	<input type="checkbox"/>
a Initiation fees and capital contributions included on Part VIII, line 12	12a	<input type="checkbox"/>
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	12b	<input type="checkbox"/>
11 Section 501(c)(12) organizations. Enter	13a	<input type="checkbox"/>
a Gross income from members or shareholders	13b	<input type="checkbox"/>
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	13c	<input type="checkbox"/>
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	14a	<input type="checkbox"/>
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	14b	<input type="checkbox"/>
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	15	<input type="checkbox"/>
a Is the organization licensed to issue qualified health plans in more than one state? <i>Note: See the instructions for additional information the organization must report on Schedule O</i>	16	<input checked="" type="checkbox"/>
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	14a	<input type="checkbox"/>
c Enter the amount of reserves on hand	14b	<input type="checkbox"/>
14a Did the organization receive any payments for indoor tanning services during the tax year?	15	<input type="checkbox"/>
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	16	<input checked="" type="checkbox"/>
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N	14a	<input type="checkbox"/>
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O	14b	<input type="checkbox"/>

Form 990 (2019)

**LUTHERAN ASSOCIATION OF MISSIONARIES AND
PILOTS U.S.**

Form 990 (2019)

39-1509253 Page 6

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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 on Schedule O.	1a	8
1b		1b	8
2	Enter the number of voting members included on line 1a, above, who are independent	2	X
3	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?	3	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	X
6	Did the organization have members or stockholders?	6	X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	8a	X
a	The governing body?	8b	X
b	Each committee with authority to act on behalf of the governing body?	9	X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	X
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b	X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12c	X
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	13	X
13	Did the organization have a written whistleblower policy?	14	X
14	Did the organization have a written document retention and destruction policy?	15a	X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15b	X
a	The organization's CEO, Executive Director, or top management official		
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	16a	X
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?	16b	
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?		

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ► **AK, CO, FL, GA, HI, KY, MD, MN, MS, NH, PA, TN**
- 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ► **PAUL D. FLAA - 262-783-5267**

15400 W CAPITOL DR., SUITE 201, BROOKFIELD, WI 53005-2661

SEE SCHEDULE O FOR FULL LIST OF STATES

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

- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee".

- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

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

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

See instructions for the order in which to list the persons above.

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

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

1b Subtotal	►		
c Total from continuation sheets to Part VII, Section A	►		
d Total (add lines 1b and 1c)	►		
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization	►		

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

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

**LUTHERAN ASSOCIATION OF MISSIONARIES AND
PILOTS U.S.**

Form 990 (2019)

39-1509253 Page 9

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f	1a 1b 1c 1d 1e 1f 1g \$				
			890,049.	890,049.		
Program Service Revenue	2 a FEE-FOR-SERVICE REVENUE b c d e f All other program service revenue g Total. Add lines 2a-2f		Business Code			
			900099	442,262.	442,262.	
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory 11 a b c d All other revenue e Total. Add lines 11a-11d	(i) Real 6a 6b 6c (i) Securities 7a 7b 7c 8a 8b 9a 9b 10a 10b Business Code				
			485.	485.		
			3,050.	3,050.		
			854.	-854.		
			-854.	-854.		
Miscellaneous Revenue	12 Total revenue. See instructions		Business Code			
				1,334,992.	442,262.	0.
				2,681.		

**LUTHERAN ASSOCIATION OF MISSIONARIES AND
PILOTS U.S.**

Form 990 (2019)

39-1509253 Page 10

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	20,475.	20,475.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	164,348.	81,275.	62,604.	20,469.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	503,844.	403,594.	20,445.	79,805.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	39,655.	30,680.	1,855.	7,120.
9 Other employee benefits	115,816.	89,287.	10,436.	16,093.
10 Payroll taxes	36,765.	24,550.	5,143.	7,072.
11 Fees for services (nonemployees).				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17	17,516.		17,516.	
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion				
13 Office expenses	244,575.	174,193.	2,258.	68,124.
14 Information technology	27,149.	11,879.	7,549.	7,721.
15 Royalties				
16 Occupancy	52,234.	32,010.	10,112.	10,112.
17 Travel	103,117.	93,824.	1,605.	7,688.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,413.	1,395.	998.	20.
20 Interest	6,267.		6,267.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	35,485.	35,485.		
23 Insurance	9,436.	5,829.	3,022.	585.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a RECRUITMENT AND TRAININ	32,245.	31,937.	64.	244.
b EQUIPMENT MAINTENANCE	2,801.	2,801.		
c FILING FEES	2,266.			2,266.
d MISCELLANEOUS	309.	162.	74.	73.
e All other expenses				
25 Total functional expenses Add lines 1 through 24e	1,416,716.	1,039,376.	149,948.	227,392.
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)

**LUTHERAN ASSOCIATION OF MISSIONARIES AND
PILOTS U.S.**

Form 990 (2019)

39-1509253 Page 11

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing ..		1	
	2 Savings and temporary cash investments	289,561.	2	295,736.
	3 Pledges and grants receivable, net ..	94,687.	3	27,953.
	4 Accounts receivable, net ..	89.	4	3,382.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons ..		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) ..		6	
	7 Notes and loans receivable, net ..		7	
	8 Inventories for sale or use ..		8	
	9 Prepaid expenses and deferred charges ..	55,254.	9	78,473.
	10a Land, buildings, and equipment, cost or other basis Complete Part VI of Schedule D	1,866,052.		
	b Less accumulated depreciation	10b 246,327.	1,620,209.	10c 1,619,725.
	11 Investments - publicly traded securities ..		11	
	12 Investments - other securities See Part IV, line 11 ..		12	
	13 Investments - program-related See Part IV, line 11 ..		13	
	14 Intangible assets ..		14	
	15 Other assets See Part IV, line 11 ..	4,852.	15	12,727.
	16 Total assets. Add lines 1 through 15 (must equal line 33)	2,064,652.	16	2,037,996.
Liabilities	17 Accounts payable and accrued expenses ..	48,859.	17	110,576.
	18 Grants payable ..		18	
	19 Deferred revenue ..		19	
	20 Tax-exempt bond liabilities ..		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D ..		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons ..		22	
	23 Secured mortgages and notes payable to unrelated third parties ..	35,100.	23	30,100.
	24 Unsecured notes and loans payable to unrelated third parties ..		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D ..	25,766.	25	24,117.
	26 Total liabilities. Add lines 17 through 25	109,725.	26	164,793.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ► <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions ..	1,815,312.	27	1,800,755.
	28 Net assets with donor restrictions ..	139,615.	28	72,448.
	Organizations that do not follow FASB ASC 958, check here ► <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds ..		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund ..		30	
	31 Retained earnings, endowment, accumulated income, or other funds ..		31	
	32 Total net assets or fund balances ..	1,954,927.	32	1,873,203.
	33 Total liabilities and net assets/fund balances	2,064,652.	33	2,037,996.

Form 990 (2019)

LUTHERAN ASSOCIATION OF MISSIONARIES AND
PILOTS U.S.

Form 990 (2019)

39-1509253 Page 12

Part XI Reconciliation of Net Assets

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

1 Total revenue (must equal Part VIII, column (A), line 12)	1	1,334,992.
2 Total expenses (must equal Part IX, column (A), line 25)	2	1,416,716.
3 Revenue less expenses Subtract line 2 from line 1	3	-81,724.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,954,927.
5 Net unrealized gains (losses) on investments	5	
6 Donated services and use of facilities	6	
7 Investment expenses	7	
8 Prior period adjustments	8	
9 Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,873,203.

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	<input checked="" type="checkbox"/>
2b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	<input checked="" type="checkbox"/>
2c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c	<input checked="" type="checkbox"/>
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3a	<input checked="" type="checkbox"/>
	3b	

Form 990 (2019)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2019

**Open to Public
Inspection**

Name of the organization LUTHERAN ASSOCIATION OF MISSIONARIES AND PILOTS U.S. Employer identification number 39-1509253

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

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 0

2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ))

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

4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state _____

5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)

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

7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)

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

9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions) Enter the name, city, and state of the college or university _____

10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)

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

12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g

a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization _____

f Enter the number of supported organizations _____

g Provide the following information about the supported organization(s) _____

(i) Name of supported organization (ii) EIN (iii) Type of organization (iv) Is the organization listed in your governing document? (v) Amount of monetary support (vi) Amount of other support

Total

LUTHERAN ASSOCIATION OF MISSIONARIES AND

Schedule A (Form 990 or 990-EZ) 2019 PILOTS U.S.

39-1509253 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	2,378,487.	2,204,605.	2,579,969.	2,072,343.	890,049.	10,125,453.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	2,378,487.	2,204,605.	2,579,969.	2,072,343.	890,049.	10,125,453.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						508,562.
						9,616,891.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4	2,378,487.	2,204,605.	2,579,969.	2,072,343.	890,049.	10,125,453.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on	23,094.	8,486.	7,693.	5,989.	3,535.	48,797.
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	-235.	125,655.	-203.	-437.	-854.	123,926.
11 Total support. Add lines 7 through 10						10,298,176.
12 Gross receipts from related activities, etc (see instructions)					12	442,262.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						► <input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	93.38	%
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	92.70	%
16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			► <input checked="" type="checkbox"/>
b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			► <input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2019. 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 organization			► <input type="checkbox"/>
b 10% -facts-and-circumstances test - 2018. 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 supported organization			► <input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			► <input type="checkbox"/>

Schedule A (Form 990 or 990-EZ) 2019

LUTHERAN ASSOCIATION OF MISSIONARIES AND

Schedule A (Form 990 or 990-EZ) 2019 PILOTS U.S.

39-1509253 Page 3

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►

1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")

2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose

3 Gross receipts from activities that are not an unrelated trade or business under section 513

4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf

5 The value of services or facilities furnished by a governmental unit to the organization without charge

6 **Total.** Add lines 1 through 5

7a Amounts included on lines 1, 2, and 3 received from disqualified persons

b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year

c Add lines 7a and 7b

8 **Public support.** (Subtract line 7c from line 6)

	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1						
2						
3						
4						
5						
6						
7a						
b						
c						
8						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►

9 Amounts from line 6

10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources

b 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 regularly carried on

12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)

13 **Total support.** (Add lines 9, 10c, 11, and 12)

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

	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9						
10a						
b						
c						
11						
12						
13						
14						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2019.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ►

b **33 1/3% support tests - 2018.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ►

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

LUTHERAN ASSOCIATION OF MISSIONARIES AND

Schedule A (Form 990 or 990-EZ) 2019 PILOTS U.S.

39-1509253 Page 4

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of 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	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

LUTHERAN ASSOCIATION OF MISSIONARIES AND

Schedule A (Form 990 or 990-EZ) 2019 PILOTS U.S.

39-1509253 Page 5

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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	
c 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	

Section 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 Part VI 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 Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2	

Section C. Type II 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 Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1	

Section D. All Type III Supporting Organizations

	Yes	No
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?	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 Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2	
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	3	

Section E. Type III Functionally Integrated Supporting Organizations

	Yes	No
1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test Answer (a) and (b) below.		
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 Part VI identify those supported organizations and explain 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 Part VI 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? Provide details in Part VI.	3a	
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	

LUTHERAN ASSOCIATION OF MISSIONARIES AND

Schedule A (Form 990 or 990-EZ) 2019 PILOTS U.S.

39-1509253 Page 6

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount		Current Year	
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions)			

Schedule A (Form 990 or 990-EZ) 2019

LUTHERAN ASSOCIATION OF MISSIONARIES AND

Schedule A (Form 990 or 990-EZ) 2019 PILOTS U.S.

39-1509253 Page 7

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI) 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 Part VI) See instructions	
9	Distributable amount for 2019 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-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2019 from Section D, line 7. \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI. See instructions			
7 Excess distributions carryover to 2020. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

LUTHERAN ASSOCIATION OF MISSIONARIES AND

Schedule A (Form 990 or 990-EZ) 2019 PILOTS U.S.

39-1509253 Page 8

Part VI

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)

PART II, SHORT YEAR EXPLANATION:

THE CURRENT TAX PERIOD IS A SHORT YEAR DUE TO THE TAXPAYER ELECTING TO

CHANGE THEIR YEAR END.

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2019Open to Public
InspectionName of the organization **LUTHERAN ASSOCIATION OF MISSIONARIES AND PILOTS U.S.** Employer identification number **39-1509253****Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6

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

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

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

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

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

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
2a	
2b	
2c	
2d	

a Total number of conservation easements

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register

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

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

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

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$ _____

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

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items

a Revenue included on Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

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

Schedule D (Form 990) 2019

**LUTHERAN ASSOCIATION OF MISSIONARIES AND
PILOTS U.S.**

Schedule D (Form 990) 2019

39-1509253 Page 2

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

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

a <input type="checkbox"/> Public exhibition	d <input type="checkbox"/> Loan or exchange program
b <input type="checkbox"/> Scholarly research	e <input type="checkbox"/> Other _____
c <input type="checkbox"/> Preservation for future generations	

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

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

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

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

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

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

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

a Board designated or quasi-endowment ► _____ %

b Permanent endowment ► _____ %

c Term endowment ► _____ %

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

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

(i) Unrelated organizations
(ii) Related organizations

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

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

Yes	No
3a(i)	
3a(ii)	
3b	

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		49,793.		49,793.
b Buildings		1,622,960.	118,663.	1,504,297.
c Leasehold improvements				
d Equipment		188,099.	127,664.	60,435.
e Other		5,200.		5,200.
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c.)			►	1,619,725.

Schedule D (Form 990) 2019

**LUTHERAN ASSOCIATION OF MISSIONARIES AND
PILOTS U.S.**

Schedule D (Form 990) 2019

39-1509253 Page 3

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ►

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15) ►

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f See Form 990, Part X, line 25

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) RENT ABATEMENT LIABILITY	24,117.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	

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

24,117.

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2019

**LUTHERAN ASSOCIATION OF MISSIONARIES AND
PILOTS U.S.**

Schedule D (Form 990) 2019

39-1509253 Page 4

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a

1	Total revenue, gains, and other support per audited financial statements	1	1,334,992.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	1,334,992.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	1,334,992.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a

1	Total expenses and losses per audited financial statements	1	1,416,716.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	1,416,716.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	1,416,716.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

PART X, LINE 2:

LUTHERAN ASSOCIATION OF MISSIONARIES & PILOTS U.S., INC. D/B/A LUTHERAN INDIAN MINISTRIES ("LIM") IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE U.S. INTERNAL REVENUE CODE. LIM IS NOT CONSIDERED A PRIVATE FOUNDATION BY THE INTERNAL REVENUE SERVICE. LIM DOES NOT CONSIDER ANY OF ITS SUPPORT AND REVENUES TO BE UNRELATED BUSINESS INCOME AND, ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEEN PROVIDED IN THE ACCOMPANYING FINANCIAL STATEMENTS.

LIM HAS IMPLEMENTED ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES IN ACCORDANCE WITH ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA. THIS STANDARD DESCRIBES A RECOGNITION THRESHOLD AND

Part XIII Supplemental Information (continued)

MEASUREMENT ATTRIBUTE FOR FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN AND ALSO PROVIDES GUIDANCE ON VARIOUS RELATED MATTERS SUCH AS DERECOGNIZING, INTEREST, PENALTIES AND DISCLOSURES REQUIRED. MANAGEMENT OF LIM EVALUATES THE UNCERTAIN TAX POSITIONS TAKEN, IF ANY, AND CONSULTS WITH OUTSIDE COUNSEL AS DEEMED NECESSARY. LIM RECOGNIZES INTEREST AND PENALTIES, IF ANY, RELATED TO UNRECOGNIZED TAX LIABILITIES IN INCOME TAX EXPENSE.

IN MANAGEMENT'S OPINION, LIM HAS NOT TAKEN ANY UNCERTAIN TAX POSITIONS AND, ACCORDINGLY, HAVE NOT REPORTED A CORRESPONDING LIABILITY IN LIM'S FINANCIAL STATEMENTS.

SCHEDULE F
(Form 990)Department of the Treasury
Internal Revenue Service**Statement of Activities Outside the United States**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019Open to Public
Inspection

Name of the organization

LUTHERAN ASSOCIATION OF MISSIONARIES AND
PILOTS U.S.

Employer identification number

39-1509253

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
NORTH AMERICA - CANADA	1	2	PROGRAM SERVICES	CRISIS COUNSELING, SUICIDE PREVENTION, FAMILY MINISTRY, TRAINING AND MENTORING	20,475.
3 a Subtotal	1	2			20,475.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	1	2			20,475.

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

Schedule F (Form 990) 2019

LUTHERAN ASSOCIATION OF MISSIONARIES AND

LUTHERAN AS
PILOTS U.S.

Immigrants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

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

Enter total number of other organizations or entities

3 Enter total number of other organizations or entities

LUTHERAN ASSOCIATION OF MISSIONARIES AND
PILOTS U.S.

Schedule F (Form 990) 2019

39-1509253 Page 4

Part 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 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*, don't file with Form 990) Yes 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*) 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 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 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*, don't file with Form 990) Yes No

Schedule F (Form 990) 2019

LUTHERAN ASSOCIATION OF MISSIONARIES AND
PILOTS U.S.

Schedule F (Form 990) 2019

39-1509253 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.

PART I, LINE 2:

REGULAR CONTACT IS MAINTAINED WITH THE SUPPORTED ORGANIZATION AND REPORTS
ON ACTIVITIES ARE RECEIVED. SUPPORTED STAFF MEMBERS OF FOREIGN
ORGANIZATION ATTEND ANNUAL STAFF MEETING AND PARTICIPATE IN REGULAR
DIALOGUE, SUBMIT ARTICLES FOR NEWSLETTERS AND OTHER MATERIALS.

PART I, LINE 3:

EXPENDITURES ARE RECORDED WHEN THE CHECK IS WRITTEN.

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.
► Go to www.irs.gov/Form990 for the latest information.

Name of the organization

LUTHERAN ASSOCIATION OF MISSIONARIES AND
PILOTS U.S.

Employer identification number
39-1509253

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

DISCIPLES NATIVE LEADERS TO SHARE THE GOSPEL WITH THEIR BROTHERS AND
SISTERS, AND PROVIDES RESOURCES TO ASSIST IN THE HEALING OF SOCIAL
SUFFERINGS WHILE VALUING NATIVE CULTURES.

FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:

DURING THE FISCAL PERIOD, LIM DISCOVERED THAT SOME OF THE SERVICES WE
OFFER IN OUR ARIZONA MINISTRY ARE ELIGIBLE FOR FEE FOR SERVICE REVENUE.
THESE SERVICES HAVE BEEN MORE PROMINENT IN OUR MINISTRY FOCUS IN RECENT
YEARS AS WE BELIEVE THAT MANY NATIVE AMERICAN PEOPLE ARE UNABLE TO HEAR
THE MESSAGE OF THE GOSPEL UNTIL THEY ADDRESS THE UNRESOLVED GRIEF AND
GENERATIONAL TRAUMA IN THEIR LIVES THAT ARE OFTEN MANIFESTED IN
ADDICTIONS, ABUSE AND SUICIDAL THOUGHTS. OUR PHOENIX MINISTRY IS OUR
FIRST VENTURE INTO AN URBAN SETTING HAS PROVIDED DIFFERENT CHALLENGES
AND OPPORTUNITIES FOR MINISTRY - IN PARTICULAR, ADDRESSING THE LARGE
HOMELESS NATIVE POPULATION WHICH IS A FURTHER SYMPTOM OF THE UNRESOLVED
GRIEF AND GENERATIONAL TRAUMA COMPOUNDED BY POVERTY.

PROVIDING SERVICES TO ASSIST NATIVE AMERICAN PEOPLE IN A HEALING
JOURNEY THAT LEADS THEM BE MORE RECEPTIVE TO THE MESSAGE OF THE GOSPEL
IS WORKING. THE ABILITY TO GENERATE NON-GIFT REVENUE FROM THESE
SERVICES HAS GIVEN US THE FREEDOM TO EXPAND OUR PROGRAMMING AT A MORE
ACCELERATED PACE. LIM BELIEVES THAT THIS PROGRAM CAN BE REPLICATED IN
OTHER URBAN AREAS WHERE THERE ARE LARGE POPULATIONS OF NATIVE AMERICAN
PEOPLE.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

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

Schedule O (Form 990 or 990-EZ) (2019)

Name of the organization	LUTHERAN ASSOCIATION OF MISSIONARIES AND PILOTS U.S.	Employer identification number
		39-1509253

CAN BE OPENED TO THE REAL TRUTH OF THE GOSPEL. LIM DOES SUPPORT TWO CONGREGATIONS IN RESERVATION LANDS AND HOSTS BIBLE STUDIES IN MANY LOCATIONS WHERE THERE ARE NATIVE BELIEVERS. MUCH MINISTRY IS ALSO DIRECTED AT SOCIAL NEEDS AND HELPING TO ADDRESS ADDICTIONS, GRIEF, TRAUMA AND HIGH RATES OF ABUSE AND SUICIDE. IN 2018, LIM BEGAN IT'S FIRST URBAN MINISTRY IN THE PHOENIX, AZ AREA. HOMELESSNESS IS PREVALENT AMONG NATIVE PEOPLE IN URBAN AREAS AND IS A NEED BEING ADDRESSED.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

LEADERSHIP TRAINING: LIM CONTINUES TO PROVIDE OPPORTUNITIES FOR NATIVE MEN TO BECOME PASTORS, AND BOTH MEN AND WOMEN TO BE LAY DEACONS. WE ALSO DISCIPLE NATIVE PEOPLE TO LEAD BIBLE STUDIES. LIM ALSO OFFERS TRAINING FOR NATIVE PEOPLE TO LEAD THE VARIOUS HEALING MINISTRY PROGRAM CURRICULUMS. LIM'S BEST PROGRAM FACILITATORS ARE THOSE WHO WERE FIRST INTRODUCED TO THE ORGANIZATION AS CLIENTS IN NEED OF THE PROGRAMS AND NOW DESIRE TO HELP OTHERS.

EXPENSES \$ 51,969. INCLUDING GRANTS OF \$ 1,024. REVENUE \$ 22,112.

FORM 990, PART VI, SECTION A, LINE 6:

THE ORGANIZATION IS A NON-STOCK CORPORATION WITH MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7B:

THE FOLLOWING DECISIONS OF THE GOVERNING BODY ARE SUBJECT TO APPROVAL BY THE MEMBERS: AMENDMENTS TO BY-LAWS, AND RECOMMENDATION TO DISSOLVE AND LIQUIDATE.

FORM 990, PART VI, SECTION B, LINE 11B:

Name of the organization	LUTHERAN ASSOCIATION OF MISSIONARIES AND PILOTS U.S.	Employer identification number
		39-1509253

FORM 990 AND RELATED SCHEDULES ARE DISTRIBUTED TO THE AUDIT COMMITTEE PRIOR TO BEING FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

NO TRANSACTIONS OCCUR WITH BOARD MEMBERS OR THEIR RELATED INTERESTS WITHOUT PRIOR KNOWLEDGE AND APPROVAL BY THE BOARD OF DIRECTORS

FORM 990, PART VI, SECTION B, LINE 15A:

THE CEO'S SALARY IS REVIEWED ANNUALLY BY THE CEO EVALUATION COMMITTEE. THE CEO PAY IS SET BY THE BOARD OF DIRECTORS AFTER REVIEWING COMPARABLE CEO SALARIES AND SUBSEQUENT TO THE CEO EVALUATION COMMITTEE REVIEW.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AK, CO, FL, GA, HI, KY, MD, MN, MS, NH, PA, TN, UT, VA, WA, WV, WI, MA, SC

FORM 990, PART VI, SECTION C, LINE 19:

THESE DOCUMENTS ARE AVAILABLE UPON REQUEST. AN ANNUAL FINANCIAL STATEMENT IS AVAILABLE ON THE ORGANIZATION'S WEBSITE.

FORM 990, PART XII, LINE 2C

NO CHANGE COMPARED TO PRIOR YEAR

FORM 990, CHANGE OF ACCOUNTING PERIOD

THE CURRENT TAX PERIOD IS A SHORT YEAR DUE TO THE TAXPAYER ELECTING TO CHANGE THEIR YEAR END.