(Rev January 2020)

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2019

	partment of rnal Revenu	the Treasury Je Service	► Go to www.irs.gov/For	-	ructions and the late	•	on.		Inspection
			ar year, or tax year beginning	61-01	, 2019, and end		12	-31	, 20 / 9
<u>—</u>	Check if a				Church Foundat				er identification number
	Address o	hange	Doing business as		-7,4,000 7,04,004,1	····) -····		_	2114099
	Name cha	_	Number and street (or P O box if mail is	not delivered to s	street address)	Room/suite	E		ne number
\Box	initial retui	•	162705 300 W	/	·		10	812)	498-6066
$\overline{\Box}$	Final return	n/terminated	City or town, state or province, country, a	and ZIP or foreign	postal code				
$\overline{\Box}$	Amended	return	- '	47201	•		G	Gross re	eceipts \$
$\overline{\Box}$	Applicatio	n pending	F Name and address of principal officer:	11440 W	10505	H(a) is the	ns a group	return for s	ubordinates? Yes No
			Louis W. Voelker	Seymour	- IN 4727				included? Yes No
<u> </u>	Tax-exem	pt status		(insert no)	4947(a)(1) or 52	3 5	No," atta	ch a list.	(see instructions)
J	Website:	>		1		H(c) Gro	oup exen	nption nu	ımber ▶
K	Form of or	ganızatıon; 🔀	Corporation Trust Association] Other ▶	L Year of for	mation. 200	O M	State of	legal domicile IN
P	art I	Summai							
	1 E	Briefly desc	ribe the organization's mission or	most signification	ant activities: 542	porting	, st.	John	Lytheran
Çe) .	Churchs	and St. John (White	Creek) L	ntheran School	s non	bud	get.	needs
nar	_							~ 	
Governance	1		box 🕨 🗌 if the organization disco	•	*	ed of more th	han 25	% of its	s net assets.
	1		voting members of the governing t	• •	•		·	3	
න් ග	1		ndependent voting members of th		• •	b)	·	4	
itie			er of individuals employed in caler	-	9 (Part V, line 2a)		·	5	
Activities &			er of volunteers (estimate if necess		<u></u>		·	6	
4			ted business revenue from Part VI				·	7a	
	b 1	vet unrelat	ed business taxable income from F	orm 990-1, I	ine 39 <u>``</u>		<u></u>	7b	
3					FEB.1.8 2020	<u> </u>	Year		Current Year
9	1		ns and grants (Part VIII, line 1h)	· · ¦B; ·	FED. 1.8 2040.	4,6	939,9	79	2,524.00
Revenue			rvice revenue (Part VIII, line 2g)		<u> </u>	1/02		-	
2			income (Part VIII, column (A), lines			1(33)	143.1	.3)	107,267.64
7	1		ue (Part VIII, column (A), lines 5, 6				9 9 2	a ()	0 -01 ///
			e—add lines 8 through 11 (must ed similar amounts paid (Part IX, colu	··		(20)	203,	29 -	109,791.64
=	1		d to or for members (Part IX, colu			<u> </u>			
	1	-	er compensation, employee benefit						
Expenses	1		I fundraising fees (Part IX, column	•					
. E	1		ising expenses (Part IX, column (D						
30			nses (Part IX, column (A), lines 11a		e)	99	60,0	18	28,039.70
5			ses. Add lines 13–17 (must equal		•		60,4		28,039,70
		-	s expenses. Subtract line 18 from				163,		81,751,94
r &				· · · · · · · · · · · · · · · · · · ·		Beginning of			End of Year
sets land	20 T	otal assets	(Part X, line 16)			582,	957	92	664, 709,86
Net Assets or Fund Balances	21 T		es (Part X, line 26)			1 3	1 11.		(d) (1) (1 · 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1
돌등	22 N	let assets	or fund balances. Subtract line 21	from line 20		532,0	7579	2	664,709.86
Pa	art II	Signatur	e Block						
			declare that I have examined this return, in					st of my	knowledge and belief, it is
true	e, correct, a	and complete	Declaration of preparer (other than officer) i	is based on all int	formation of which prepa	irer has any kno	owledge		
٠.		.	Hours & Toelk	en			02	<u>-01-</u>	-2020
Sign		Signatu	e of officer				Date		•
Here Louis W Voelker, Treasurer									
		· ··	print name and title						<u></u>
Pai	id	Print/Type	preparer's name Prepare	er's signature		Date		eck 🗌	
	eparer						se	f-employ	/ea
	e Only	Firm's nam	<u> </u>				irm's Ell		
		Firm's addi				P	hone no		
			is return with the preparer shown		· · · · · · · · · · · · · · · · · · ·	<u></u>	• •	<u> </u>	Yes No
For	Paperwo	rk Reduction	n Act Notice, see the separate instr	uctions.	Cat	. No 11282Y			Form 990 (2019)

1	Briefly describe the organization's mission:
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
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 \$ 3,500.00 including grants of \$ 0) (Revenue \$ 0
	Gave St. John Latheran Youth Group to help with expenses for their attendance at the Synodical Youth Guthering in Milwaukee Wisconsin.
4b	(Code:) (Expenses \$ 20, 248,69 including grants of \$ 0) (Revenue \$ 0)
	,
	Paid John A Becker Company and Bieble Electric Inc For conversion of the school's lighting to L.E.D.
40	(Code:) (Expenses \$ 4, 2, 91, 01 including grants of \$ 0) (Revenue \$ 0)
40	•
	Gave St. John Latheron School (White Creek) for the full cost and shipping For a 3 section / 65.88 cabic Lot refrigeratore
4d	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$) Total program service expenses \$ 1803970
40	Total program service expenses > 1 \Q \alpha 19 70

Form 990 (2019) 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		Yes	No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
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? <i>If "Yes," complete Schedule C, Part II</i>	4		_X_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			í
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		<u>X</u> _
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<i>X</i>
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		<i>X</i>
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	12b		Y
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		_X_
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
		Form	990	(2019)

Part	Checklist of Required Schedules (continued)		T	T
00	Did the appropriate ground many than 65 000 of growth as ather social and the section of the sec	_	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	\$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		×
b	• • • • • • • • • • • • • • • • • • • •	24b	 	—
C	to defease any tax-exempt bonds?	24c	+	
d		24d	├	↓
25a	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):			
а		28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	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		×
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		Х
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? Note: All Form 990 filers are required to complete Schedule O.	38	X	
Part			• •	
			Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			_ _
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? NoT $APPLICARUE$	10		ı

FORM 98	· · ·			rage •
Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
_	S. H. H. C.		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 O			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	_	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O.	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X_
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Χ_
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	0.5		
, a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
a	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		Ī	
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			لـــا
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	-		
^	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a		
a b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
11	Section 501(c)(12) organizations. Enter:	1		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which	1		
	the organization is licensed to issue qualified health plans		ļ	
С	Enter the amount of reserves on hand			<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X_
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
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?	15		~
	excess parachute payment(s) during the year?	"		<u> X</u>
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		\overline{X}
	If "Yes," complete Form 4720, Schedule O.	 		
		Form	990	(2019)

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. Check if Schedule O contains a response or note to any line in this Part VI	See ii	nstruc	ctions.						
Sect	on A. Governing Body and Management			<u>. </u>						
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year La 7									
	If there are material differences in voting rights among members of the governing body, or	Ì								
	if the governing body delegated broad authority to an executive committee or similar									
	committee, explain on Schedule O.									
b	Enter the number of voting members included on line 1a, above, who are independent . 1b O	1								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .	3		×						
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									
а	the year by the following: The governing body?		Y							
b	Each committee with authority to act on behalf of the governing body? . NOT. ACCLICATIONE.	8a 8b	1							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	<u>60</u>								
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X						
Secti	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	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b								
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c								
13	Did the organization have a written whistleblower policy?	13		X						
14	Did the organization have a written document retention and destruction policy?	14		X						
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
а	The organization's CEO, Executive Director, or top management official N.O.T . APPLICABLE .	15a								
b	Other officers or key employees of the organization	15b								
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		$\frac{1}{x}$						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b								
Section	on C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed ► Indiana									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (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)	(Sect	ion 5	01(c)						
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of	inter	est n	alicy						
- •	and financial statements available to the public during the tax year.		20. pt	Jiioy,						
20	State the name, address, and telephone number of the person who possesses the organization's books and rec	ords I	▶							
Lou	is W Voelker, Treasurer, 11440 W 1050 S, Seymour IN 47274 (812) 498-4	,066	, 0							

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

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 employees."
- 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.

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

(A) Name and trile	(B) Average hours per week (list any hours for related organizations below dotted line)	do x, office Individua	ot ch	Pos neck ss pe	c) ition more	than of the Highest compensated	one n an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Glen V Meyer, President		×	e	×		ated		0	0	0
(2) Delbert E Peters, Vice Pres.		X		×				O	0	6
(3) Joan M Peters, Secretary		×		Х				0	0	0
(4) Louis W Voelker, Treasurer		×		X				0	0	6
(5) Clara B Claycamp		×					-	0	0	0
(6) Nikki Finke		×						0	O	σ
(7) Brign Schultz Congregation Chairman (8)		×						0	0	0
(9)										
(10)										
(11)										
(12)										
(13)									- "	
(14)										

Par	Section A. Onicers, Directors,	i rustees,	Key I		DIO.	yee	s, ar	ia F	lighest Compe	nsated	Emplo	yees (contin	iued
	(A) Name and title	(B) Average hours per week (list any hours for related	Average hours officer and a director/tu			e than is both or/trus	n an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)		(F) Estimated amount of other compensation from the organization and related organizations		on and	
44.00		organizations below dotted line)	trustee	al trustee		oyee	Highest compensated employee							
(15)					•									
(16)													- · · · · · · · · · · · · · · · · · · ·	
(17)														
(18)												_		
(19)														
(20)														
(21)							-						_	
(22)										· · ·,				
(23)					-									
(24)														
(25)													.=	
1b	Subtotal							>	0	0			0	
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)			•		 	. !	>	0	0		<u>.</u>	0	
2	Total number of individuals (including but	not limited) wh			00,000	of		
	reportable compensation from the organiz	zation >											Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete S							npic	oyee, or highes	t compe	nsated	3		X
4	For any individual listed on line 1a, is the organization and related organizations													
5	individual								. •			4		X
Section	for services rendered to the organization? on B. Independent Contractors	ii res, co	ompie	ne s	SCII	eau	ie J i	or su	ich person .	· · ·	• •	5		<u>X</u> _
1	Complete this table for your five high- compensation from the organization. Repo													
	(A) Name and business addr	ess							(B) Description of servi	ces	С	(C) ompens	ation	
		·												
2	Total number of independent contractor	rs (including	a but	- 00	nt lu	mite	nd to	tho	se listed above) who				
_	received more than \$100,000 of compensa							410		, 1110				

		-,								1 age (
Par	t VIII	Statement of Re Check if Schedule			eenor	nse or note to a	ny line in this Pa	art VIII		
		Officer if Sofficedule	0 00	mans a r	espoi	ise of flote to a	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
s s	1a	Federated campaig	ins .		1a	1	 			
Contributions, Gifts, Grants and Other Similar Amounts	Ь	Membership dues			1b	 	1	}		1
\$ 5	c	Fundraising events			1c		1	1		
Ę, Ę	d	Related organizatio			1d		-			
<u>声</u>	e	Government grants			1e	 -	1	}		
Š, E				-			-			
<u> </u>	f	All other contribution and similar amounts no				0 =0 (1 +0				
支	l				1f	2,524.00	-	1		
. ₹ Σ	g	Noncash contribution								
	l .	lines 1a–1f			1g	12				
	h	Total. Add lines 1a-	- 1† .	-:	<u>· · · </u>	· · · •	2,524,00			
4	į					Business Code				
ؾؘؚ	2a									
e e	b				- -					
S I	С									
gram Ser Revenue	d									
Program Service Revenue	е									
Ž.	f	All other program se								
	g	Total. Add lines 2a-	-2f .			<u></u> ▶	<u></u>			
	3	Investment income	(inc	ludıng divi	idend	s, interest, and				
	[other similar amoun					107,267.64	107,267,64		
	4	Income from investr	nent :	of tax-exer	npt bo	ond proceeds >		,		
	5	Royalties	<u></u>			<u> </u>			_	
	i		ļ	(i) Rea	al .	(ii) Personal				
	6a	Gross rents	6a]			
	b	Less: rental expenses	6b]			
	С	Rental income or (loss)	6c				1			
	d	Net rental income o	r (los	s)		🕨				
	7a	Gross amount from		(i) Secun	ties	(II) Other				
	, , ,	sales of assets								
		other than inventory	7a							
a	ь	Less: cost or other basis					1			
eune		and sales expenses .	7b							i
	c	Gain or (loss)	7c							
Ř		Net gain or (loss)				•				• •
Other Rev	ì	Gross income from				1				-
₹	- Ou	events (not including		no aong	1		,			
		of contributions rep		d on line						
		1c). See Part IV, line			8a			1]	
	b	Less: direct expense			8b		•			
		Net income or (loss)				nts ▶	-			
		Gross income f			7					
	Ja	activities. See Part I			9a					
	h	Less: direct expense			9b					Ì
		Net income or (loss)				es >				
		Gross sales of in		-						1
	iva	returns and allowan		ory, less	10a					
	h	Less: cost of goods			10b					
		Net income or (loss)				orv				
		1481 IIIOOME OF (1088)	11011	JUICO UI II	IACIIIC	Business Code				
Sn(44-					Dusiness Code				
e e	11a									
scellaned Revenue	b					·				
è ë	C	AB allowers								
Miscellaneous Revenue		All other revenue				<u> </u>				
		Total. Add lines 11a								
	12	Total revenue. See	ınstrı	uctions		<u> ▶</u>	104.791.64	109,791,64		

•	· ·	
D - 4 IV	Statement of Functional Expenses	
26124	Statement of Functional Fynenses	

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										
	et include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to 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			N						
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				!					
4	Benefits paid to or for members				· · · · · · · · · · · · · · · · · · ·					
5	Compensation of current officers, directors, trustees, and key employees				•					
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)									
7	Other salaries and wages									
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)									
9	Other employee benefits									
10	Payroll taxes									
11	Fees for services (nonemployees):									
а	Management									
b	Legal									
C	Accounting									
d	Lobbying									
e	Professional fundraising services. See Part IV, line 17									
f	Investment management fees									
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	, 								
12	Advertising and promotion									
13	<u> </u>									
_	•				· · · · · · · · · · · · · · · · · · ·					
14	Information technology									
15	Royalties									
16	Occupancy									
17	Travel									
18	Payments of travel or entertainment expenses for any federal, state, or local public officials		·							
19	Conferences, conventions, and meetings .									
20	Interest									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization .									
23	Insurance ,									
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.)									
а	Youth Grave Synud youth gathering	3,500,00	3,500,00	٥	<u> </u>					
b	Convert school to LED lighting	20,248,69	20,248.69	0	0					
С	Convert school to LED lighting New school 3 section retrigeratur	4,291.01	4,291.01	0	<u> </u>					
d		·	-							
е	All other expenses									
25	Total functional expenses. Add lines 1 through 24e	28,039,70	28,039.70	0	0					
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)	,								

Ρ	art X		4 V		
		Check if Schedule O contains a response or note to any line in this Pai	(A) Beginning of year		· · · · · · 山 (B) End of year
	1	Cash—non-interest-bearing	155,114,58	1	129,598,88
	2	Savings and temporary cash investments	19.2)11.119-	2	12.13.141.00
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	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	
Ø	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a			
	Ь	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities	427,843,34	11	535, 110, 98
	12	Investments—other securities See Part IV, line 11	16.70191-7	12	9.59) 11.21 10
	13	Investments—program-related. See Part IV, line 11		13	******
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	582,957.92	16	664,709.86
	17	Accounts payable and accrued expenses		17	44 1973 1786
	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	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
Ħ		controlled entity or family member of any of these persons		22	· ·
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
_	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X			
		of Schedule D	:	25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
	20	Organizations that follow FASB ASC 958, check here ▶ □			
Š		and complete lines 27, 28, 32, and 33.			
a	27	Net assets without donor restrictions		27	
Ba	28	Net assets with donor restrictions		28	
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here ▶ □	- / -		
<u> </u>	00	and complete lines 29 through 33.	502 057 69	29	1111 200 81
ţş	29	Capital stock or trust principal, or current funds	582,957.92	30	464,709.86
Se	30	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	31	Retained earnings, endowment, accumulated income, or other funds	582,957,92	32	664, 709, 86
Jet	32	Total liabilities and not process.		33	664,709.86
_	33	Total liabilities and net assets/fund balances	582,957,92	JJ	Form 990 (2019)

Page	1	2

Par	IXI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	• •	• •	•	<u>. 🗆</u>
1	Total revenue (must equal Part VIII, column (A), line 12)		29,	791	.64
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,	039	.70
3	Revenue less expenses. Subtract line 2 from line 1		<u>ز /</u>	<u> 25/,</u>	94
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4	588	2, 9	57,	92
5	Net unrealized gains (losses) on investments		· 		
6	Donated services and use of facilities				
7	Investment expenses				
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain on Schedule O)				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	6	64.	700	1.86
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: 🔀 Cash 🗌 Accrual 📗 Other	[[
	If the organization changed its method of accounting from a prior year or checked "Other," explain	ın			.
	Schedule O.	_			لــــا
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	. <u>L</u>	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled	or			1
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis	_			
b	Were the organization's financial statements audited by an independent accountant?	. <u>L</u> i	2b		X
•	If "Yes," check a box below to indicate whether the financial statements for the year were audited on	ı a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis	_	<u> </u>		
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				l
	the audit, review, or compilation of its financial statements and selection of an independent accountant? .		2c		ļ
	If the organization changed either its oversight process or selection process during the tax year, explain	on	-		
	Schedule O.	_			
3a	, , , , , , , , , , , , , , , , , , , ,		ľ	Í	
	Single Audit Act and OMB Circular A-133?	` ⊢	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo t				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.	' I '	3b		
			Form	990	(2019)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047 2019

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ,

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection Employer identification number

_	St. John Luther					1 35-21140	
_	rt I Reason for Public Cha	arity Status (Al	l organizations mus	t compl	ete this	part.) See instructi	ons.
	organization is not a private found						1
1	A church, convention of church						ハ
2	A school described in section						<i>)</i>
3 4	☐ A hospital or a cooperative ho☐ A medical research organization						Mills Fataurala
4	hospital's name, city, and state		conjunction with a nos	pital des	cribea in	section 1/0(b)(1)(A)(III). Enter the
5	An organization operated for		college or university	owned	or operat	ed by a governmen	tal unit described in
	section 170(b)(1)(A)(iv). (Com		conege or arriversity	OWING	or operat	ed by a governmen	ital ullit described il
6	A federal, state, or local gover	•	nmental unit describe	d in sect	ion 170(b	λ(1)(Δ)(v).	
7	An organization that normally						m the general public
	described in section 170(b)(1)(A)(vi). (Comple	ete Part II.)	•	J		эта данала расла
8	A community trust described	in section 170(b)(1)(A)(vi). (Complete	Part II.)			
9	An agricultural research organ	nization describe	d in section 170(b)(1)	(A)(ix) o	perated in	conjunction with a	land-grant college
	or university or a non-land-gra university:	ant college of ag	riculture (see ınstructi	ons). Ent	er the nai	me, city, and state o	f the college or
10	An organization that normally	receives: (1) mo	re than 331/3% of its s	upport fr	om contr	ibutions, membershi	p fees, and gross
	receipts from activities related support from gross investmen	it income and ur	irelated business taxa	ble incor	ne (less s	section 511 tax) from	IN 331/3% of its businesses
	acquired by the organization a	after June 30, 19	75. See section 509 (a)(2). (Co	mplete P	art III.)	
11	An organization organized and						
12	An organization organized and	l operated exclus	sively for the benefit of	f, to perf	orm the f	unctions of, or to ca	my out the purposes
	of one or more publicly support the control of the	orted organizatio	ons described in sect	ion 509(i	a)(1) or s	ection 509(a)(2). Se	e section 509(a)(3).
а					-	·	•
a	the supported organization	n(s) the nower to	regularly appoint or 6	elect a m	its suppo	the directors or trust	typically by giving
	supporting organization. Y	ou must compl	ete Part IV. Sections	A and B	ajority or	the directors of trust	lees of the
b	_					supported organizat	ion(s) by baying
	control or management of						
	organization(s). You must				•		
С	Type III functionally integ	i <mark>rated.</mark> A suppor	ting organization ope	rated in c	connectio	n with, and function	ally integrated with,
	its supported organization(
d	Type III non-functionally						
	that is not functionally integrated						nd an attentiveness
_	requirement (see instructio				-		
е	☐ Check this box if the organ functionally integrated, or 1	nization received Type III non-fund	a written determination	on from t	he IRS th	at it is a Type I, Typo	e II, Type III
f	Enter the number of supported of			oporting.	organizat		<u> </u>
g							· · L
	(i) Name of supported organization	(n) EIN	(iii) Type of organization		organization	(v) Amount of monetary	(vi) Amount of
	_		(described on lines 1–10		ur governing iment?	support (see	other support (see
	!		above (see instructions))	0000	iiii Biili 7	instructions)	instructions)
				Yes	No		
(A)	ļ						
(B)							
	······································						
(C)							
(C)					 		
(D)							
(E)							
·-/							
Total	!	4	(*)		I		

Par	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 1 or if the organization failed to qualify under						
	Part III. If the organization fails to	qualify und	er the tests li	sted below, p	lease comple	ete Part III.)	
***************************************	ion A. Public Support		r		 		<i></i>
	ndar 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	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by				1		
	each person (other than a						
	governmental unit or publicly						•
	supported organization) included on line 1 that exceeds 2% of the amount		Ì				
	shown on line 11, column (f)		,			ļ	
6	Public support. Subtract line 5 from line 4	~ · · · · · · · · · · · · · · · · · · ·					
_	on B. Total Support		L 			L	
Caler	idar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4		f				
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		l 1				
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
4.4	(Explain in Part VI.)						
11 12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc.	/see instructu	one)			12	
13	First five years. If the Form 990 is for the			d. third. fourth	or fifth tax ve		n 501(c)(3)
	organization, check this box and stop her	e					▶ □
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2019 (line 6			1, column (f))		14	%
15	Public support percentage from 2018 Sch					15	%
16a	331/3% support test—2019. If the organization qual						~ _
b	331/3% support test 2018. If the organization	-		_			· .· .► ∐.
	this box and stop here. The organization						► □
17a	10%-facts-and-circumstances test – 20	-	* * *	_		6a, or 16b. and	
_	10% or more, and if the organization me	ets the "facts	-and-circumsta	ances" test, ch	neck this box a	ind stop here.	Explain in
	Part VI how/the organization meets the "f	facts-and-circ	umstances" te	st. The organi	zation qualifies	as a publicly	supported
	organizatión						▶ 🗆
b	10%-facts-and-circumstances test—20						
	15 is 10% or more, and if the organization members in Part VI how the organization members in the second se						
	supported organization			nances lest.	me organizatio	on qualifies as	. • □
18	Private foundation. If the organization did	not check a	box on line 13.	16a, 16b, 17a	, or 17b. check	this box and	see
/	Instructions						▶ 🖂

Part	(Complete only if you checked the					d to our life	- d - v D - 2 11
	If the organization fails to qualify	He box on lin	e Tu of Part I	or it the orga	nization falled	a to quality ur	ider Part II.
Soot		under the te	ests listed bei	ow, please co	omplete Part	11.)	
	ion A. Public Support	() 0015	#1 0010	T () 22/2	r		
	ndar 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	Gross receipts from admissions, merchandise	<u> </u>		·			
2	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						ı
	or expended on its behalf						
5	The value of services or facilities		1				
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5			1			
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						
С	Add lines 7a and 7b		/				
8	Public support. (Subtract line 7c from		/		-		
	line 6.)						
Secti	on B. Total Support				<u> </u>	لم د د	
Calen	dar year (or fiscal year beginning in) ▶	(a) 2015	(b) ∕2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,	/	1				
	royalties, and income from similar sources.						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975		<u> </u>				
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		1				
	loss from the sale of capital assets				İ	İ	
	(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, check this box and stop her				· · · · ·		· · > 🗀
Section	on C. Computation of∕Public Suppor						
15	Public support percentage for 2019 (line 8					15	<u>%</u>
16	Public support percentage from 2018 Sch				<u> </u>	16	%
Section	on D. Computation of Investment Inc						
17	Investment income percentage for 2019 (I					17	%_
18	Investment/income percentage from 2018					18	%
19a	331/3% support tests-2019. If the organi						
	17 is not more than 331/3%, check this box a						_
b	331/3% support tests-2018. If the organization						
	line 18 is not more than 331/3%, check this b	oox and stop h	ere. The organi	zation qualifies	as a publicly su	pported organi	zation 🕨 🔲
20	Private foundation. If the organization did	d not check a	box on line 14,	19a, or 19b, c	heck this box a	and see instruc	tions 🕨 🗌

Supporting Organizations_ Part IV

(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	۹. Ali	Supporting	Organizations	

Secu	ion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
_	class or purpose, describe the designation. If historic and continuing relationship, explain.	1	ļ	ļ
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	-	 	
-	(b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and	Ja	 	
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.			
_	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	3b		
C	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
_	Did the organization support any foreign supported organization that does not have an IRS determination	40		
С	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?			
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity			
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8	 -	<u>l</u>
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b		9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit	30		<u>I</u>
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9с		
10a	j ,			- 1
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a]
ь	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			<u> </u>
-	determine whether the organization had excess business holdings.)	10b		

Part	IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			T
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	<u> </u>		
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
<u>Secti</u>	on 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		i]
	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.			
	organizations and what conditions of 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		
Secti	on 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		
<u>Secti</u>	on 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		l	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			ļ
	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		L
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		<u> </u>
3	By reason of the relationship described in (2), did the organization's supported organizations have a			1
	significant voice in the organization's investment policies and in directing the use of the organization's			1
	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		
	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstruc	ctions	š).
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (г		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а.	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	1	1	
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	1 1	j	
	those supported organizations and explain how these activities directly furthered their exempt purposes,		ļ	
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
	·	2a		·
þ	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		J	
	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.)	
а	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	Į	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organic	gan	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organization.	g tru	ist on Nov. 20, 1970 (exp tions must complete Sec	lain in Part VI). See tions 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		.1
7 Check here if the current year is the organization's first as a non-functionall instructions).	y int	egrated Type III supporti	ng organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organ	izations (continued)			
Sect	Section D—Distributions					
1	Amounts paid to supported organizations to accomplish					
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	orted			
	organizations, in excess of income from activity					
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	anizations			
	Amounts paid to acquire exempt-use assets					
5	Qualified set-aside amounts (prior IRS approval required)					
<u>6</u>	Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6.					
7		h the every strong or year				
	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	n the organization is res	sponsive 			
9	Distributable amount for 2019 from Section C, line 6		· · · · · · · · · · · · · · · · · · ·			
10	Line 8 amount divided by line 9 amount					
Sect	ion 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					
с	From 2016					
d	From 2017					
е	From 2018					
f	Total of lines 3a through e					
	Applied to underdistributions of prior years					
<u>h</u>	Applied to 2019 distributable amount					
i	Carryover from 2014 not applied (see instructions)					
<u>j</u>	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			<u> </u>		
	Applied to Underdistributions of prior years Applied to 2019 distributable amount					
c	Remainder. Subtract lines 4a and 4b from 4.			j		
5	Remaining underdistributions for years prior to 2019, if					
3	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 3 _j and 4c.	-	-			
8	Breakdown of line 7:					
а	Excess from 2015					
b	Excess from 2016					
С	Excess from 2017					
d	Excess from 2018					
е	Excess from 2019			, <u>,</u> , ,		

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.)
	·

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

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.

OMB No. 1545-0047

2019

Open to Public Inspection

Employer identification number

St. John Lutheran Church Foundation, Inc.	35-2/14099
Part VI, Section B, Line 116	·
All members of the foundation board receive a copy of	the Form 990 and have
access to all account statements and records. The	
welcome to review this 990 and account statemen	. •
copy of this form 990 is provided to the past	
office.	
······	
Part VI, Section C, Line 19	
A financial report is made quarterly to the church	
The entire congregation, as well as anyone else,	
review all documents, forms, and statements.	
Since everyone in the congregation knows every	
no risk of conflict of interest becoming a p	1 .
·	