Extended to May 15, 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)

▶ Do not enter social security numbers on this form as it may be made public.

Inspection

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2018 calendar year, or tax year beginning JUIL 1 2018

Open to Public

OMB No. 1545-0047

_		and endin	g JUN 3	30, 2019	
В	Check applica	if C Name of organization			cation number
Γ	Add	LUTHERAN ELEMENTARY SCHOOL ASSOCIATION			
Ē	Nam				
	Initia	Number and street (or D.O. b. 17. 19.1			853158
	Fina	W 11123 SOUTH TOWNE SOHARE	suite E Tele	ephone numbe	
	term	City or town, state or province, country, and ZIP or foreign postal code	0.0		200-0790
	Ame			s receipts \$	1,458,626.
	App tion	F Name and address of principal officer: MARTI.VN RRTCKIED		this a group re	
	pend	- 11123 SOUTH TOWNE SOUARE, ST. LOUIS MO 6		or subordinates	res \(\text{No} \)
1	Tax-e	xempt status: X 501(c)(3)	A STATE OF THE STA		list. (see instructions)
J	Webs	ite: ▶ www.lesastl.org		roup exemptio	
		of organization: X Corporation Trust Association Other			A State of legal domicile: MO
P	art I	Guilliary			
Se	1	Briefly describe the organization's mission or most significant activities: A Christ	-cente	red res	ource for
Governance		chose who learn and teach in Lutheran school	g in t	ho St	Louis area
Verr	2	if the organization discontinued its operations or disposed of	more than 25	5% of its net as	ssets.
ĝ	3	Number of voting members of the governing body (Part VI, line 1a)		10	11
∾ŏ	5	Number of independent voting members of the governing body (Part VI, line 1b)		4	11
Activities &	6	Total number of individuals employed in calendar year 2018 (Part V, line 1s)		5	4
cţi	50753	Total jurglated business reveals from Day VIII.		6	218
Ă	b	rotal directed business revenue from Part VIII, column (C), line 12		7-	0.
		Net unrelated business taxable income from Form 990-T, line 38			0.
a	8	Contributions and grants (Part VIII, line 1h)		r Year	Current Year
Revenue	9	Program service revenue (Part VIII, line 2g)		89,674.	<u>859,221.</u>
eve	10	Investment income (Part VIII, line 2g) Other and (Part VIII, column (A), lines 3, 4, and 7d)	1	0.	0.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		47,631. 68,557.	599,405.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		68,748.	$\frac{-74,008}{1,384,618}$
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		74,000.	514,828.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2	74,567.	286,559.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Ϋ́	D	Total fundraising expenses (Part IX, column (D), line 25)		,	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2	45,011.	259,167.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	9	93,578.	1,060,554.
es	19	Revenue less expenses. Subtract line 18 from line 12		75,170.	324,064.
ets (20	Total assets (Part X, line 16)		f Current Year	End of Year
ASS J Ba	21	Total liabilities (Part X, line 16)		00,335.	8,978,571.
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20		95,821.	12,047.
	rt II	Signature Block	8,3	04,514.	8,966,524.
Jnde	er pena	alties of perjury, I declare that I have examined this return, including accompanying schedules and states and complete. Declaration of property (above the entire of the complete of the comp	tomonto and	4a 4b - b b - f	Leave Later and Later
rue,	correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer bac any k	to the best of my	knowledge and belief, it is
		Mandan to make	arei ilas ally k	nowledge.	1
Sigr		Signature of officer		Date	120
Here	е	MARILYN BRICKLER, CHAIRMAN			
		Type or print name and title			
.		Print/Type preparer's name Pregarer's signature	Date	Check	PTIN
aid		SHAWN WILLIAMSON Shawr Williamson	1/29/	20 if self-employe	P01202759
	arer	Firm's name Fick, Eggemeyer & Williamson, CPA's		Firm's EIN	37-1231621
196	Only	Firm's address 6240 S. Lindbergh, Ste 101			
Anı	the II	St. Louis, MO 63123		Phone no. 31	4-845-7999
vidy	uie II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

Form **8868** (Rev. January 2019)

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury

File a separate application for each return. ► Go to www.irs.gov/Form8868 for the latest information. OMB No. 1545-1709

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870. Information

Contr filing o	acts, for which an extension request must be sent to the IF of this form, visit www.irs.gov/e-file-providers/e-file-for-char	RS in pape	r format (see instructions). For more	Personal details o	Benefit n the electronic	
	omatic 6-Month Extension of Time. Only subn					
All cor	rporations required to file an income tax return other than F	orm 990.T	finduding 1120 C filoral nathembi		<u> </u>	
must	use Form 7004 to request an extension of time to file incom	ne tax retu	rns.	ps, HEMI	Cs, and trusts	
				E-4 40	lauta tatu ayo ta u	
Туре	or Name of exempt organization or other filer, see instru	uctions		, 	ler's identifying nu	
print				Employe	er identification nur	nber (EIN) or
File by t	LUTHERAN ELEMENTARY SCHOOL	ASSO	CIATION		43-18531	58
due date	of or Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.	Social se	ecurity number (SS	
return. S	See TITIONNE SQUARE,]	No. F				,
instructi	ons. City, town or post office, state, and ZIP code. For a for ST. LOUIS, MO 63123	oreign add	lress, see instructions.			
Enter	the Return Code for the return that this application is for (fill	e a senara	te application for each return)			101-1
Applic	eation	Return		• • • • • • • • • • • • • • • • • • • •	······································	0 1
Is For		Code	Application Is For			Return
Form 9	990 or Form 990-EZ	01	Form 990-T (corporation)		· · · · · · · · · · · · · · · · · · ·	Code 07
	990-BL	02	Form 1041-A			08
	1720 (individual)	03	Form 4720 (other than individual)	09		
	990-PF	04	Form 5227	10		
	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form S	orm 990-T (trust other than above) 06 Form 8870					12
• The	SUE NAHMENSEN	 ~.				
Tele	books are in the care of \blacktriangleright 11123 SOUTH TOWN aphone No. \blacktriangleright 314-200-0790	NNE S	QUARE, No. F - ST	LOUIS	, MO 6312	3
• If th	be organization does not have an office or place of business		Fax No.			
• If th	e organization does not have an office or place of business is is for a Group Return, enter the organization's four digit (Group Evo	motion Number (OCA)			-
box 🕨	. If it is for part of the group, check this box	and attac	Ch a list with the names and FINs of	this is fo	r the whole group,	check this
		and attai	ch a list with the names and EINs of	all memb	ers the extension	is for.
1 1	request an automatic 6-month extension of time until	May	7 15, 2020 to file	the even	npt organization re	hurn for
t	he organization named above. The extension is for the orga	anization's	return for:	THO CACH	ipt organization re	IUITI IUI
•	calendar year or					
•	X tax year beginning JUL 1, 2018	, and	d ending <u>JUN 30, 2019</u>			
2	f the tay year entered in line 1 is for less than 40		F			
- '	f the tax year entered in line 1 is for less than 12 months, ch Change in accounting period	neck reasc	on: Initial return F	inal retur	n	
	Change in accounting period					
3a	f this application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069 e	enter the tentative tay less			
<u>a</u>	ny nonrefundable credits. See instructions.	0, 0000, 0	The terralive tax, less	3a		0
b li	f this application is for Forms 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and	Sa	\$	0.
<u>e</u>	stimated tax payments made, Include any prior year overpa	ayment all	owed as a credit.	3b	\$	0.
C E	Balance due. Subtract line 3b from line 3a. Include your pay	yment with	this form, if required, by	1 55		
<u>U</u>	ising EFTPS (Electronic Federal Tax Payment System). See	instruction	ns.	3c	\$	0.
Cautio instruct	n: If you are going to make an electronic funds withdrawal (tions.	(direct deb	oit) with this Form 8868, see Form 84	153-EO ar	nd Form 8879-EO f	or payment

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2019)

Form 990 (2018)

Form 990 (2018)

43-1853158 Page 3

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Yes	No
	ii res, complete Schedule A	١.		1
2	The state of the s	1	X	-
3		2	X	
	public officer in res, complete scriedule C, Part I	9		v
4		3	 	X
_	asimg the tax years in these, complete schedule C. Part II	4		Х
5		-	 	<u>^</u>
_	amounts as defined in Revenue Procedure 98-19? If "Yes." complete Schedule C. Part III	5		Х
6	and organization maintain any donor advised funds or any similar funds or accounts for which donors have the	<u> </u>	 	122
7	provide device on the distribution of investment of amounts in such funds or accounts? If "Voc." complete Sebadule D. D. H.	6		X
7	and a support to be the of floid a conservation easement including easements to process and an arrangement			1
	the environment, historic land areas, or historic structures? If "Yes " complete School to D. Book II	7		х
8	and an engineering the control of works of art, historical treasures, or other similar accepta? If the treasures are other similar accepta?			
9	oundation by Fair III	8		х
9	are A line 21, for escrow of custodial account liability, come as a quetadian fee			
	If "You " complete Oct 11 at A, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
10	" res, complete schedule D, Part IV	9		Х
	and a section, directly of thiough a related organization, hold accept in tompororily restricts at			
	The state of the s	10	Х	
• •	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.			
	as approache.			
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
b	Part VI	11a	X	
С	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments.	11b		X
	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 162 /f "Yes." complete Sabadul D. D. D. William			
d	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total	11c		_X_
	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	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate as acceptable of the schedule D, Part X	11d		<u>X</u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e	X	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		ĺ	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	X	
	Schedule D, Parts XI and XII			
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	12a	_X	
	" 165, and if the Organization answered "No" to line 12a, then completing School to D. Darte VI. and VII. and VII.		l	
10	is the organization a scribble described in section 170(b)(1)(A)(ii)? If "Yes " complete Schodule F	12b		_ <u>x</u> _
	and office, employees, or agents outside of the United States?	13		<u>X</u>
~	and the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraining, business	14a		_X_
	arroadilate, and program service activities outside the United States, or aggregate foreign investments refused at the case	ĺ		
	or more in Test, complete schedule F, Parts I and IV	445		v
	and a support of the lift in Column (A), lifte 3, more than \$5,000 of grants or other posistance to an in-	14b		<u>X</u>
'	roleigh organization? If Yes," complete Schedule F, Parts II and IV	15	1	v
	The same and the s	15		<u>X</u>
•	or for foreign individuals? If Yes, "complete Schedule F. Parts III and IV	16	I	<u>x</u> _
	The state of those than \$10,000 to expenses for professional fundraising consists and Day 19	-10		
•	oosanti (v), mos o and i re i i res, complete Schedule G. Part I	17		Х
	The state of the s	**		
	To and out it it les, complete scriedule G, Part II	18	x	
	The part more than \$15,000 of those income from daming activities on Day VIII the 0-0 true.	, ,		
(COMPLETO SCHOOLUG C. Dowt III		1	X
٠.	Somplete Scriedile G, Part III	79 !		
	complete Schedule G, Part III	19 20a		
b i	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		X
b i 21 [Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 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			

22	Did the organization report more than \$5,000 of greats and the		Yes	No
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 22, If "Yes," complete Schooling I Parts I and III.			
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII. Section A line 3. 4 and 5.4	22	X	<u> </u>
	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 ampleyees, and birth at			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			Ì
248	Schedule J Did the organization have a tax-exempt hond issue with an outstanding principal and the organization have a tax-exempt hond issue with an outstanding principal and the organization have a tax-exempt hond issue with an outstanding principal and the organization have a tax-exempt hond issue with an outstanding principal and the organization have a tax-exempt hond issue with an outstanding principal and the organization have a tax-exempt hond issue with an outstanding principal and the organization have a tax-exempt hond issue with an outstanding principal and the organization have a tax-exempt hond issue with an outstanding principal and the organization have a tax-exempt hond issue with an outstanding principal and the organization have a tax-exempt hond issue with an outstanding principal and the organization have a tax-exempt hond issue with an outstanding principal and the organization have a tax-exempt hond issue with an outstanding principal and the organization have a tax-exempt hond issue with an outstanding principal and the organization have a tax-exempt hond issue with an outstanding principal and the organization have a tax-exempt hond in the organization have a tax-exempt have a tax-	23		X
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			j
	Schedule K. If "No," go to line 25a	24a		X
,	A Least of the policy policy policy policy beyond a fellionist ballou by	24b		
	. But the organization maintain an escrow account other than a refunding escrow at any time during the year to defense			
	any tax-exempt bonus?	24c		
05-	and a second position position of second at any time divide the near,	24d		
25a	. Social to ((5)(5), 50 ((5)(4), and 50 ((5)(29) organizations. Did the organization engage in an expect hearti			
	transaction with a disqualified person during the year? If "Yes." complete Schedule I. Part I	25a		x
C	the trib organization aware triat 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			
	ochequie E, Fait I	25b		Х
26	bit the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	200		
	is the concers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "You "			
	complete Schedule L, Part II	00		37
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	26		<u>X</u>
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III			
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	27		<u>X</u>
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			
b	A family member of a current or former officer, director, trustee, earlier earlier and the control of the current of a current or former officer, director, trustee, earlier earlier and the current of t	28a		_X_
С	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		_X_
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect or indirect or was 23 to 1975.			
29	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
30	The first state of the first \$25,000 in non-cash contributions? If "Yes." complete Schedule M	29	Х	
00	Did the diganization receive contributions of art, historical treasures, or other similar appets, or qualified and a supply of the similar appets.			
31	contributions? If "Yes," complete Schedule M Did the organization liquidate terminate or dissolve and occasions, or other similar assets, or qualified conservation	30	- 1	X
31	and descriptions of the second			
20	If "Yes," complete Schedule N, Part I Did the organization sell exchange dispose of	31	İ	X
32	organization sell, exchange, dispose of, or transfer more than 25% of its net assets 2 ff "Voc." complete			
	Schedule N, Part II	32		X
33	The wife organization own 10070 Orall Phillip (IISTANGIANA) as congrete from the assessment of the constant of	Jan		
	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	33		
	rait v, iine r	24	ĺ	v
35 a	within the meaning of section 512/b)(13)?	34		<u>X</u>
b	The state of the organization receive any payment from or engago in any transaction with a section of	35a		<u>X</u>
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities the second sec			
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		<u>X</u>
	and that is treated as a partnership for federal income tay purposed (##Ver #		1	
38	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u>X</u>
	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			
Par	t V Statements Regarding Other IRS Filings and Tax Compliance	38	X	
·	Check if Schedule O contains a response or note to any line in this Part V			
	- The same of contains a response of flote to any line in this Part V		[
1.	Enter the number reported in D. C. C.		Yes	No
Ιά	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
U	criter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	bid the digalization comply with backup withholding rules for reportable payments to yourders and target the			
	genumg) withings to prize winners?	1c	x	
	19.21.18			

O18) LUTHERAN ELEMENTARY SCHOOL ASSOCIATION
Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			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 return2a4			
b	the property and the organization me an required rederal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X
b	to the state of th	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	tax oriented tax oriented tax oriented 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	greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		_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 required			
	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	,		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
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.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:		Ì	
a	Initiation fees and capital contributions included on Part VIII, line 12		İ	
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
•0	amounts due or received from them.)			
ıza L	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
12 12	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		1	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
L	Note. See the instructions for additional information the organization must report on Schedule O.			
Đ	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			
1/10	Enter the amount of reserves on hand Did the organization receive any any and the organization receives any any any any any any any any any any			
iTd h	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u>X</u>
15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
	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		X
16	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.	1		

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

	Check if Schedule O contains a response or note to any line in this Part VI			[X]
Sec	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year1a11			
	If there are material differences in voting rights among members of the governing body, or if the governing	1	İ	
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b			ĺ	
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		v
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision		·	X
	of officers, directors, or trustees, or key employees to a management company or other person?			7.7
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	3		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	4		X
6	Did the organization have members or stockholders?	5		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	6		Х
	more members of the governing body?			
b	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7a_		<u>X</u>
-				
8		7b		_X
а	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body?			
h		8a	_X_	
'n	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	}		
800	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion 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		Х
b	res, 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	Х	
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	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120	-22	
	in Schedule O how this was done	400	х	
13	Did the proprietion to the state of the stat	12c	X	
14	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?	13		
15	Did the process for determining compensation of the following persons include a review and approval by independent	14	Х	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official			
b	Other officers or key employees of the organization	15a	_X_	
	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	15b		<u>X</u>
16a	Did the organization invest in contribute secrets to process in Schedule O (see instructions).			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?			
h	***************************************	16a		<u>X</u>
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			
500	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►MO			
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)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy and	financ	cial	
	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.			
	<u>50E NAHMENSEN - 314-200-0790</u>			
	11123 SOUTH TOWNE SQUARE, No. F, ST LOUIS, MO 63123			
	1 == == == == == == == == == == == == ==			

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LUTHERAN ELEMENTARY SCHOOL ASSOCIATION

43-1853158

Page 7

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	
The period of flote to diffy line in this rait vir	

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.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A)	(B)	Τ			C)		.,,	(D)		/F)
Name and Title	Average			Pos	ition	1		Reportable	(E)	(F)
	hours per	(do	not c	heck	more	than	one b an	compensation	Reportable compensation	Estimated amount of
	week	offi	cer ar	d a d	lirecto	or/trus	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or dir	93		ļ	ated		organization	(W·2/1099-MISC)	from the
	related	ustee	truste		يو	bens		(W-2/1099-MISC)		organization
	organizations below	ual tr	Іопа		ploye	t com				and related
	line)	individual trustee or director	Institutional trustee	Officer	Кеу етріоуее	Highest compensated employee	Former			organizations
(1) JERRY WOLLENBURG	1.00	=	=	0	×	Ξ a	-			
BOARD MEMBER		x						0.	0.	^
(2) CARLA KIRBY	1.00				<u> </u>			<u> </u>	V •	0.
BOARD MEMBER		x			ĺ			0.	0.	0.
(3) MARC DEBRICK	1.00				<u> </u>			<u> </u>	V •	<u> </u>
BOARD MEMBER		Х						0.	0.	0.
(4) REV. SCOTT SCHMIEDING	1.00					†		<u> </u>	· ·	<u> </u>
BOARD MEMBER		х		ļ				0.	0.	0.
(5) JACQUELYN BRANNEKY	1.00								0.	<u>U.</u>
SECRETARY		х		\mathbf{x}				0.	0.	0.
(6) DANIEL QUINN	1.00							· ·		<u>U•</u>
TREASURER		$ \mathbf{x} $		\mathbf{x}			.	0.	0.	0.
(7) MARILYN BRICKLER	1.00							•	<u> </u>	<u> </u>
CHAIRMAN		x	.	x				0.	0.	0
(8) PAUL NIEWALD	1.00									0.
BOARD MEMBER		х						0.	0.	0
(9) DENNIS KEMPER	1.00						_		0.	0.
VICE CHAIR		х		\mathbf{x}			İ	0.	0.	0.
(10) ANN ANDERSON	1.00									<u> </u>
BOARD MEMBER		х						0.	0.	0.
(11) JEFF SCHMITT	1.00							0.	· · ·	<u> </u>
BOARD MEMBER		Х						0.	0.	0.
(12) KIP STARNES	1.00								<u>0.</u>	<u> </u>
BOARD MEMBER		х						0.	0.	0.
(13) WENDY MORRIS	1.00						\neg			<u></u>
BOARD MEMBER		X	l					0.	0.	0.
										<u>U•</u>
		İ	ļ							
						\neg	_			-
			1							
				\neg	\neg		\dashv			
				$\neg \uparrow$						

		5 Trigarization of tax year.								
	(A) Name and business address	NONE	(B) Description of services	(C) Compensation						
2	Total number of independent contractors (including bu \$100,000 of compensation from the organization	t not limited to those	listed above) who received more than							

Form 990 (2018)
Part VIII Statement of Revenue

		Check if Schedule O con	tains a response	or note to any l	ine 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
nts	1 1	a Federated campaigns	1a					312-314
Contributions, Gifts, Grants and Other Similar Amounts	l	b Membership dues	1b	32,363.				
A,C		c Fundraising events		338,740.				
ar E	i	A Challester A	1d					
Š,		e Government grants (contribu		V. 100				
tion S] 1	All other contributions, gifts, gran			1			
ig t		similar amounts not included abo		488,118.				
할	و	Noncash contributions included in lines						
<u>ਨੂੰ ਵ</u>	ŀ	Total. Add lines 1a-1f			859,221.			
				Business Code				
e	2 8	1				•		
Program Service Revenue	Ł							
Sch								
e s		_						
گ	6							
ď	f	All other program service reve	enue					
		Total, Add lines 2a-2f						
	3	Investment income (including	dividends, inter-	est, and				
		other similar amounts)			241,467.	241,467.		
	4	Income from investment of ta	x-exempt bond p	proceeds -				
	5	Royalties	····					
			(i) Real	(ii) Personal				
	6 a	***************						
	b		-					
	C	: Rental income or (loss)						
		Net rental income or (loss)	·					
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
			357,938.					
	b	Less: cost or other basis						
		and sales expenses	0.					
	C	Gain or (loss)	357,938.	l				
	d	Net gain or (loss)		······ >	357,938.	357,938.		
enne	ва	Gross income from fundraising	g events (not					
- 3- /		including \$ 338,7						
Other Re		contributions reported on line						
her	_	Part IV, line 18	a	0.				
ō		Less: direct expenses	b	74,008.	74.000	*		
	9.3	Net income or (loss) from fund Gross income from gaming ac	iraising events	······	-74,008.			<u>-74,008.</u>
	9 4							
	h	Part IV, line 19 Less: direct expenses	a					
		Net income or (loss) from gam	ing optivities					
	10 a	Gross sales of inventory, less	roturns	······				
		and allowances		,				
	b	Less: cost of goods sold	a					
	c	Net income or (loss) from sales	s of inventory			İ		
	···	Miscellaneous Revenue		Business Code				
	11 a			Dusiness Code				
	b							
	C						· · · · · · · · · · · · · · · · · · ·	
	d	All other revenue						
	е	Total. Add lines 11a-11d						
	12	Total revenue. See instructions	***************************************	>	1,384,618.	599,405.	0 -	-74,008.

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

7b, 1 2 3	Check if Schedule O contains a response Include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	(A) Total expenses	(B) Program service	(C)	(D)
2	and domestic governments. See Part IV, line 21		expenses	Management and general expenses	(D) Fundraising expenses
3				3	onpolisos .
	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	514,828.	514,828.		
4	Grants and other assistance to foreign				
4	organizations, foreign governments, and foreign				
4	individuals. See Part IV, lines 15 and 16				
5	Benefits paid to or for members				
5	Compensation of current officers, directors,				
6	trustees, and key employees Compensation not included above, to disqualified				
Ü	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	224 020			
8	Pension plan accruals and contributions (include	234,038.	201,497.	8,062.	24,479.
•	section 401(k) and 403(b) employer contributions)	20 002	24 40-		
9	Other employee benefits	39,803.	34,185.	1,393.	4,225.
10	Payroll taxes	12,718.	10 650		
11	Fees for services (non-employees):	14,/18.	10,673.	646.	1,399.
	Management				
b	Legal				
С	Accounting	4,400.	2 420		
d	Lobbying	4,400.	3,429.	547.	424.
е	Professional fundraising services. See Part IV, line 17				
	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	975.	235.	139.	CO1
14	Information technology	3,3.	233.	139.	601.
15	Royalties				·
16	Occupancy	21,352.	16,761.	2,307.	2 204
	Travel	4,084.	3,272.	408.	2,284.
18	Payments of travel or entertainment expenses		3,212.	400,	404.
	for any federal, state, or local public officials			`	
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	990.	904.	41.	45.
	Insurance	5,464.	4,377.	546.	541.
i	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)	·			
	INVESTMENT FEES	72,318.		72,318.	
b <u>i</u>	JOINT MARKETING EXPENSE	32,987.	2,642.	330.	30,015.
C	STUDENT ASSESSMENT SUPP	25,813.	25,813.		30,013.
d i	STEM PROGRAMMING	16,930.	16,930.		
	All other expenses	73,854.	60,060.	11,360.	2,434.
	Total functional expenses. Add lines 1 through 24e	1,060,554.	895,606.	98,097.	66,851.
	Joint costs. Complete this line only if the organization				<u> </u>
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.			¥.	
	Check here if following SOP 98-2 (ASC 958-720)			· ·	

Form 990 (2018)
Part X Balance Sheet

·		Check if Schedule O contains a response or no	te to any lin	e in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	******		***************************************	1	
	2	Savings and temporary cash investments			660,070.	2	751,339.
	3	Pledges and grants receivable, net	************		67,000.		61,000.
	4	Accounts receivable, net				4	1,500.
	5	Loans and other receivables from current and for	ormer office	rs, directors,			
		trustees, key employees, and highest compens	ated employ	ees. Complete			
		Part II of Schedule L	•••••			5	
	6	Loans and other receivables from other disqual	ified person	s (as defined under			
		section 4958(f)(1)), persons described in section	n 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of sec					
Assets		employees' beneficiary organizations (see instr)	. Complete I	Part II of Sch L		6	
\SS(7	Notes and loans receivable, net				7	
4	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges	• • • • • • • • • • • • • • • • • • • •		5,277.	9	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		10,536.			
		Less: accumulated depreciation	10b	6,961.	2,034.	10c	3,575.
	11	Investments - publicly traded securities			7,600,187.	11	3,575. 8,093,585.
	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			65,767.	15	67,572.
	16	Total assets. Add lines 1 through 15 (must equ	8,400,335.	16	8,978,571.		
	17	Accounts payable and accrued expenses				17	
	18	Grants payable				18	
	19	Deferred revenue			15,654.	19	4,620.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV of So	hedule D		21	
jes	22	Loans and other payables to current and former	officers, dir	ectors, trustees,			
Liabilities		key employees, highest compensated employee	es, and disq	ualified persons.			
<u>E</u>		Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrela	ated third pa	ırties		23	
	24	Unsecured notes and loans payable to unrelated	d third partie	es		24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines		·			
	00	Schedule D			80,167.	25	7,427.
	26	Total liabilities. Add lines 17 through 25			95,821.	26	12,047.
"		Organizations that follow SFAS 117 (ASC 958		re 🕨 🔛 and			
ĕ	07	complete lines 27 through 29, and lines 33 and					
<u>a</u>	27	Unrestricted net assets	***************************************		1,446,410.	27	947,233.
B	28 29	Temporarily restricted net assets			681,256.	28	2,110,674.
S I	29	Permanently restricted net assets			6,176,848.	29	5,908,617.
Ē.		Organizations that do not follow SFAS 117 (A	SC 958), ch	eck here			
s	20	and complete lines 30 through 34.					
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		····		30	
t As	31	Paid-in or capital surplus, or land, building, or eq	ulpment fur	ıd		31	
Ne	32 33	Retained earnings, endowment, accumulated in	come, or oth	ner funds	0 004 54	32	
	34	Total liabilities and not posses (for all habitations)			8,304,514.	33	8,966,524.
	J-+	Total liabilities and net assets/fund balances			8,400,335.	34	<u>8,978,571.</u>

Form **990** (2018)

	n 990 (2018) LUTHERAN ELEMENTARY SCHOOL ASSOCIATION	43-18	53158	Pad	ae 12
Pa	art XI Reconciliation of Net Assets				3
	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	1,384	1,6	18.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,060		
3	Revenue less expenses. Subtract line 2 from line 1	3			64.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8,304		
5	Net unrealized gains (losses) on investments	5	-172		
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	509	9,9	47.
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	8,966	5,5	24.
Pa	rt XII Financial Statements and Reporting	/			***************************************
	Check if Schedule O contains a response or note to any line in this Part XII				\mathbf{x}
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.			Í
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	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:				i
	Separate basis Consolidated basis Both consolidated and separate basis				ĺ
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	ĺ
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				ĺ
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	х	ĺ
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Audit			i
	Act and OMB Circular A-133?	-	За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		. 3b		

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Name of the organization

Inspection Employer identification number

		LUTH	HERAN ELEM	ENTARY SCHOOL	L ASSO	CIAT	ON		13-1853158
	art I	Reason for Public	Charity Status	(All organizations must o	complete ti	his part.) S	ee instructions		10 100100
The	organ	ization is not a private found	idation because it is	: (For lines 1 through 12,	check only	y one box.)		
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).							
2	Щ	A school described in sec	tion 170(b)(1)(A)(ii).	. (Attach Schedule E (For	m 990 or 9	990-EZ).)	~ ~ ~ ~		
3		A hospital or a cooperative	e hospital service or	ganization described in s	ection 17	O(b)(1)(A)(iii).		
4		A medical research organiz	ization operated in c	onjunction with a hospita	al describe	d in section	on 170(b)(1)(A	Kiii). Enter	r the hospital's name
		city, and state:							
5		An organization operated f	for the benefit of a c	college or university owne	ed or opera	ated by a c	overnmental u	nit descri	bed in
		section 170(b)(1)(A)(iv). (Complete Part II.)						
6		A federal, state, or local go	overnment or govern	nmental unit described in	section 1	70(b)(1)(A)(v).		
7		An organization that norma	ally receives a subst	tantial part of its support	from a gov	vernmenta	l unit or from t	ne general	I public described in
		section 170(b)(1)(A)(vi). (C	Complete Part II.)	•	Ū			90	. pas
8		A community trust describ	ed in section 170(b)(1)(A)(vi). (Complete Pa	rt II.)				
9		An agricultural research or	ganization describe	d in section 170(b)(1)(A)	(ix) operat	ed in coni	unction with a	land-grant	t college
		or university or a non-land-	grant college of agri	iculture (see instructions)	. Enter the	name cit	v. and state of	the collec	ne or
		university:		•			,,		,
10	X	An organization that norma	ally receives: (1) mor	re than 33 1/3% of its su	pport from	contributi	ons members	hio fees a	and aross receipts from
		activities related to its exer	mpt functions - subj	ect to certain exceptions	. and (2) no	o more tha	in 33 1/3% of	its sunnar	t from aross investment
		income and unrelated busing	iness taxable incom	e (less section 511 tax) fi	om busine	esses acqu	ired by the or	nanization	after June 30, 1975
		See section 509(a)(2). (Co	mplete Part III.)	,			2 3.3 3. 7	gar ii Latiori	alter ourie 60, 1375.
11		An organization organized	and operated exclu	sively to test for public sa	afety. See	section 5	09(a)(4).		
12		An organization organized	and operated exclu	sively for the benefit of, t	o perform	the function	ons of, or to ca	rry out the	e purposes of one or
		more publicly supported or	rganizations describ	ed in section 509(a)(1)	r section	509(a)(2).	See section 5	09(a)(3). (Check the box in
		lines 12a through 12d that	describes the type	of supporting organization	n and con	nplete line	s 12e. 12f. and	12a.	
а	L	Type I. A supporting orga	anization operated,	supervised, or controlled	by its sup	ported or	anization(s). t	vpically by	v alvina
		the supported organization	ion(s) the power to r	egularly appoint or elect	a majority	of the dire	ctors or truste	es of the s	supportina
		organization. You must o	complete Part IV, S	ections A and B.					- opporting
b	Ĺ	Type II. A supporting org	ganization supervise	d or controlled in connec	tion with it	ts support	ed organizatio	n(s), by ha	ivina
		control or management o	of the supporting or	ganization vested in the s	ame perso	ons that co	ontrol or mana	ae the sur	ported
		organization(s). You mus	st complete Part IV	, Sections A and C.	·			J	
С	· L	Type III functionally inte	egrated. A supportin	ng organization operated	in connec	tion with,	and functional	v integrate	ed with.
		its supported organization	n(s) (see instruction	s). You must complete	Part IV, Se	ections A.	D. and E.	,	
d	L	Type III non-functionally	y integrated. A sup	porting organization oper	ated in co	nnection v	vith its suppor	ted organi	ization(s)
		that is not functionally int	tegrated. The organ	ization generally must sa	tisfy a dist	ribution re	quirement and	an attent	iveness
		requirement (see instruct	tions). You must co	mplete Part IV, Sections	s A and D.	and Part	v.		
е	L	Check this box if the orga	anization received a	written determination fro	m the IRS	that it is a	Type I. Type	II. Type III	
		functionally integrated, or	r Type III non-function	onally integrated support	ing organiz	zation.	,, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, . , , ,	
f	Enter	the number of supported of	organizations						
9	Provi	de the following informatior	n about the support	ed organization(s).					
	(1)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) is the orga in your governi	inization listed ing document?	(v) Amount of	monetary	(vi) Amount of other
		Organization		above (see instructions))	Yes	No	support (see in:	structions)	support (see instructions)

		,							
ota	1		i						

Schedule A (Form 990 or 990-EZ) 2018 LUTHERAN ELEMENTARY SCHOOL ASSOCIATION 43-1853158 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.)

Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and		1 37-33	(6) 2010	(4) 2017	(e) 2016	(f) Total
	membership fees received. (Do not						
	include any "unusual grants.")						
2							
	ization'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 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,						
6	Public support. Subtract line 5 from line 4.						
Sed	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(-) 2019	/O Tabal
	Amounts from line 4		10/2010	(0) 2010	(u) 2017	(e) 2018	(f) Total
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,		ļ				
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	etc /see instruct	iona)		<u>[</u>		
	First five years. If the Form 990 is for			d familia a contr		12	
	organization, check this box and ston	here	s inst, second, triir	a, tourth, or titth ta	ax year as a section	on 501(c)(3)	, —
Sec	organization, check this box and stop ction C. Computation of Publi	c Support Pe	ercentage				>
14	Public support percentage for 2018 (lin	ne 6, column (f) c	divided by line 11, c	olumn (fl)		14	%
15	Public support percentage from 2017	Schedule A, Pari	t II, line 14			15	
16a	33 1/3% support test - 2018. If the or	rganization did no	ot check the box or	line 13 and line	14 is 33 1/3% or r	nore check this ho	v and
	stop here. The organization qualifies a	s a publicly supp	oorted organization	· ····································	14 10 00 17070 011	nore, check this bo	× and
b	33 1/3% support test - 2017. If the or	ganization did no	ot check a box on li	ne 13 or 16a, and	line 15 is 33 1/30/	6 or more, check th	io boy
	and stop here. The organization qualif	ies as a publiciv	supported organiza	ntion	10 13 00 1/3%	o or more, check th	13 DOX
17a	10% -facts-and-circumstances test	- 2018. If the ord	anization did not c	heck a hoy on line	13 162 or 16b	and line 14 is 10%	
	and if the organization meets the "fact	s-and-circumstar	ces" test, check th	is box and stan b	era Evolain in Da	rt VI how the acces	or more,
	meets the "facts-and-circumstances" t	est. The organiza	ation qualifies as a	oublicly supported	iere, Explain in Pa Lorganization	it vi now the organ	ızation 🛌 🦳
b	10% -facts-and-circumstances test	- 2017. If the ord	anization did not c	heck a hoy on line	13 16a 16h ar	17a and line 15 is 1	P
	more, and if the organization meets the	e "facts-and-circ	ımstances" test of	eck this hav and	eton hara Evolsi:	in a, and the 10 is	10% 01
	organization meets the "facts-and-circu	umstances" test	The organization of	ualifies as a nublic	oly supported essi	inirait villow the	. —
18	Private foundation. If the organization	did not check a	box on line 13 16	16h 17a or 17h	on supported orgi	anization	······································
				, 100, 17a, 01 17L	O COLOUR THIS DOX S	A TO SEE INSTRUCTIONS	· P

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(=) 0010	(D. T+-)
1	Gifts, grants, contributions, and		(-)	(0) 2010	(4) 2017	(e) 2018	(f) Total
	membership fees received. (Do not						
	include any "unusual grants.")	968,633.	1 105 200	4 000 000	277 155	F00 401	
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the		1,195,299	1,092,992,	3//,155.	520,481.	4,154,560.
_	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513			1			
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5	968,633.	1,195,299,	1 000 000	277 155	F 0 0 4 0 1	
	Amounts included on lines 1, 2, and	2007033.	1,195,299,	1,092,992,	377,155.	520,481.	4,154,560,
	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						0.
	Add lines 7a and 7b						0.
	Public support. (Subtract line 7c from line 6.)						0.
Sec	etion B. Total Support	L					4 154 560
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
40-	Amounts from line 6	968,633.	1,195,299.	1,092,992.	377,155.	520,481.	4,154,560.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	306,524.	93,895.	139 661	214,621.		
b	Unrelated business taxable income			100/001.	214,021.	241,407.	996,168.
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b	306,524.	93,895.	120 661	014 604	0.44 4.55	
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	300,324.	93,693.	139,661.	214,621.	241,467.	996,168.
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	287,382.	311,482.	277,940.	312,519.	338,740.	1,528,063,
	Total support. (Add lines 9, 10c, 11, and 12.)	1,562,539,	1,600,676.	1,510,593.	904,295.	1 100 699	£ £70 701
14	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	x year as a section	1 501(c)(3) organiz	ation.
	check this box and stop here						▶ □
Sec	tion C. Computation of Publi	c Support Per	rcentage				
15	Public support percentage for 2018 (li	ine 8, column (f), d	ivided by line 13. c	olumn (fl)		15	62.21 %
16	Public support percentage from 2017	Schedule A. Part	III. line 15		ŗ	16	
Sec	tion D. Computation of Inves	tment Income	Percentage			10	<u>%</u>
17	Investment income percentage for 20	18 (line 10c. colum	n (f) divided by lic	e 13 column (fi)		4-1	14 00
18	Investment income percentage from 2	2017 Schedule A	Part III ling 17	ie 13, column (i)) .		17	<u>14.92 %</u>
19a	33 1/3% support tests - 2018 If the	organization did n	ot obselvation to a server			18	%
	19a 33 1/3% support tests - 2018. 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						
h	33 1/3% support tests = 2047 If the	organization - 10	organization qualifi	es as a publicly su	pported organizat	tion	►\X
D	33 1/3% support tests - 2017. If the	organization did n	ot check a box on	line 14 or line 19a,	and line 16 is mo	re than 33 1/3%, a	and
	inte to is not more than 33 1/3%, che	ck this box and sto	op here. The organ	ization qualifies as	a publicly suppor	rted organization	
20	Private foundation. If the organization	n did not check a b	oox on line 14, 19a	, or 19b, check thi	s box and see ins	tructions	>

Schedule A (Form 990 or 990-EZ) 2018 LUTHERAN ELEMENTARY SCHOOL ASSOCIATION 43-1853158 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 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. 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 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer За b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. 3b c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. Зс 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 c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in 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? 5b c Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c 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 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor 7 (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 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). 8 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as 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 Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI. 9b c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 9c 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below. 10a b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

determine whether the organization had excess business holdings.)

10b

Sch	edule A (Form 990 or 990-EZ) 2018 LUTHERAN ELEMENTARY SCHOOL ASSOCIATION 43-18 rt IV Supporting Organizations (continued)	35315	8 Pa	age 5
L			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		163	140
а				
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	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		
Sec	ction B. Type I Supporting Organizations		·	<u> </u>
			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.	11		
2	Did the organization operate for the benefit of any supported organization other than the supported		Ì	
	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,			
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
<u> </u>	tion of Type it oupporting Organizations			
1	Were a majority of the organization's directors or trustoon during the toy year also a majority of the organization's		Yes	No
•	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).			
Sec	tion D. All Type III Supporting Organizations	1	L	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		165	NU
	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			
<u></u>	supported organizations played in this regard.	3		
	tion 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 yea(see instructions).		
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.			
с 2	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instactivities Test. Answer (a) and (b) below.	tructions		
ے a			Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in 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.			
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	2a		
_	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.	25		
3	Parent of Supported Organizations. Answer (a) and (b) below.	2b		
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? <i>Provide details in Part VI</i> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Sch	edule A (Form 990 or 990-EZ) 2018 LUTHERAN ELEMENTARY SCH	HOOL	ASSOCIATION	43-1853158 Page 6
L	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orga	anizations /	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust o	n Nov. 20, 1970 (explain	in Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	omplete :	Sections A through E.	
Sect	tion 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		
Sect	ion 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):			
<u>a</u>	Average monthly value of securities	1a		
<u>b</u>	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
<u>d</u>	Total (add lines 1a, 1b, and 1c)	1d		
е	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		
Sect	ion 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	1 1		
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional		ated Type III supporting o	organization (see
	instructions).	,		3

Schedule A (Form 990 or 990-EZ) 2018

Pa	rt V Type III Non-Functionally Integrated 500	IENTARY SCHOOL	ASSOCIATION 4	13-1853158 Page 7
	rt V Type III Non-Functionally Integrated 509	dayor supporting Orga	anizations (continued)	
1	Amounts paid to supported organizations to accomplish exe			Current Year
2	Amounts paid to perform activity that directly furthers exemp			
-	organizations, in excess of income from activity	br barboses or supported		
3	Administrative expenses paid to accomplish exempt purpos	on of augmented accoming time		
4	Amounts paid to acquire exempt-use assets	es or supported organization	IS	
5	Qualified set-aside amounts (prior IRS approval required)		- the term of the	
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 t	he organization is responsive		
-	(provide details in Part VI). See instructions.	ne organization is responsive	•	
9	Distributable amount for 2018 from Section C, line 6			
	Line 8 amount divided by line 9 amount			
	arrised by mile o direction	///	/:: \	/:::\
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018		· · · · · · · · · · · · · · · · · · ·	
а	From 2013			
b	From 2014			
С	From 2015			
d	From 2016			
е	From 2017		· · · · · · · · · · · · · · · · · · ·	
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years		**************************************	
	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)		· · · · · · · · · · · · · · · · · · ·	
i_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:	V-11.00		
а	Excess from 2014			
b	Excess from 2015			
С	Excess from 2016	184.85		
d	Excess from 2017			
P	Excess from 2018			1

Schedule A (Form 990 or 990-EZ) 2018

D1 V	TOWNS OF SOCIATION 43-1853158 Page
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 B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No. 1545-0047

2018

LUTHERAN ELEMENTARY SCHOOL ASSOCIATION

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

Employer identification number

43-1853158

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Organization type (check one):							
Filers of:		Section:					
Form 99	90 or 990-EZ	X 501(c)(3) (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private foundation					
		527 political organization					
Form 99	90-PF	501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
Note: O	nly a section 501(c)(covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General	l Rule						
		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special	Rules						
X	sections 509(a)(1) a any one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from f, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; line 1. Complete Parts I and II.					
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.						
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
but it mi	ust answer "No" on	eat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to					

Name of organization

Employer identification number

LUTHERAN ELEMENTARY SCHOOL ASSOCIATION

43-1853158

Part II	Noncash Property (see instructions). Use duplicate copies of Par	t II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

Name of organization

Employer identification number

LUTHER Part III	RAN ELEMENTARY SCHOOL A Exclusively religious, charitable, etc., contribut	ions to organizations described in s	section 501(c)(7), (8), or (10)	43-1853158 that total more than \$1,000 for the year
	from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional) through (e) and the following line er charitable, etc., contributions of \$1,000 or	ntry. For organizations	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
	Transferee's name, address, a	(e) Transfer of git		nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
	Transferee's name, address, al	(e) Transfer of gif		nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
	Transferee's name, address, ar	(e) Transfer of gif		nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	eription of how gift is held
	Transferee's name, address, at	(e) Transfer of gif		nsferor to transferee

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 Open to Public Inspection

Name of the organization

Employer identification number

	LUTHERAN ELEMENTARY SCHOOL ASSOC	!IATION	43-1853158
Pa	organizations Maintaining Donor Advised Funds or Other Sin	nilar Funds or A	Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6.		
	(a) Donor advised fu	ınds	(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 i	in donor advised fur	nds
	are the organization's property, subject to the organization's exclusive legal control?	ar donor davided far	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 o	ther purpose confe	rring
	impermissible private benefit?		
Pa	irt II Conservation Easements. Complete if the organization answered "Yes" o	n Form 990 Part IV	/ line 7
1	Purpose(s) of conservation easements held by the organization (check all that apply).	777 OTTI 550, FAIL IV	, 1110 7.
·		ntion of a biotasically	. See a set and to a discour
			y important land area
	Preservation of open space	ation of a certified h	istoric structure
2			
_	Complete lines 2a through 2d if the organization held a qualified conservation contribution	on in the form of a co	
_	day of the tax year.		Held at the End of the Tax Year
d	Total paragraphisms described by a second se		2a
D	Total acreage restricted by conservation easements		2b
С.	Number of conservation easements on a certified historic structure included in (a)		2c
d	and the moladed in (o) addance and 1720/00, and not on a n	nistoric structure	
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, extinguished, or term	ninated by the organ	nization 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		
	violations, and enforcement of the conservation easements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and e	enforcing conservati	ion easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforce	cing conservation ea	asements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above satisfy the requirements o	of section 170(h)(4)(E	3)(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 state	ment, and balance sheet, and
	include, if applicable, the text of the footnote to the organization's financial statements the	nat describes the or	ganization's accounting for
r ===	conservation easements.		
Pai	rt III Organizations Maintaining Collections of Art, Historical Treas	ures, 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 SFAS 116 (ASC 958), not to report in its re-	evenue statement a	nd balance sheet works of art,
	historical treasures, or other similar assets held for public exhibition, education, or research	ch 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 SFAS 116 (ASC 958), to report in its reven	nue statement and b	palance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, education, or research in furth	nerance of public se	rvice, provide the following amounts
	relating to these items:	, , , , , , , , , , , , , , , , , , , ,	, p
	(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 asset	ts for financial cain	provide
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these		provide
а	Revenue included on Form 990. Part VIII. line 1	30 NOI113.	• •
	Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X	***************************************	
			🕨 \$

	art III Organizations Maintaining	N ELEMENTA	RY SCHOOL	ASSOCIATI	ON	<u>43-18</u>	35315	8 F	⊃age 2
L	Organizations Maintaining	Collections of A	rt, Historical T	reasures, or O	ther Simil	ar Asse	e ts (conti	nued))
3	osing the organization's acquisition, access	ion, and other record	ds, check any of the	following that are	a significant	use of its	collectio	n iten	ns
	(Check all that apply):								
	Public exhibition	C	Loan or exc	change programs					
	Scholarly research	e	Other						
	Preservation for future generations								
4	Provide a description of the organization's c	ollections and explai	n how they further t	the organization's e	xempt purpo	se in Par	t XIII.		
5	builting the year, did the organization solicit of	r receive donations	of art, historical trea	asures or other sim	ilar accoto				
P	to be sold to raise funds rather than to be mart IV Escrow and Custodial Arran	aintained as part of t	he organization's c	ollection?			Yes		No
	reported an amount on Form 990, Pa	gements. Comple rt X, line 21.	ete if the organization	on answered "Yes"	on Form 990	, Part IV,	line 9, or	•	
18	Is the organization an agent, trustee, custod		liary for contribution	ns or other accete r	ot included				
	on Form 990, Part X?		indity for continuation	is or other assets r	iot included		7	Γ	٦
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:	***************************************	•••••••••		_ Yes	L	_ l No
			arrang tubio.				Amoun		
c	Beginning balance				1c		Amoun		
c	Additions during the year	*******			1d				
е	Distributions during the year				ا م1			•	
f	Litting balance				14	·····			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	for escrow or ci	ustodial account lia	hility?		Yes		No
b	if Yes, explain the arrangement in Part XIII.	Check here if the ex	nlanation has been	provided on Bort V	/III				7 70
Pa	rt V Endowment Funds. Complete it	the organization an	swered "Yes" on Fo	orm 990, Part IV, lin	e 10.				
		(a) Current year	(b) Prior year	(c) Two years back		ears back	(e) Four	vears	hack
1a	3 - ,	7,772,840.	7,335,526,	6,130,452		58,718.	1		427.
b	***************************************	219,421.	294,553,	212,406		90,137,			685,
C		853,175,	843,315.	1,054,724	1	24.737.			699.
d						,,,,,,			,0,0,0
е	1								
	and programs	338,276.	628,519.						
f	Administrative expenses	72,318,	72,035.	62,056		53,140,		52	.093.
9	End of year balance	8,128,223,	7,772,840.	7 335 526		30,452.	5	-	718.
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1g, column (a	i)) held as:					<u> </u>
a	Board designated or quasi-endowment		_%						
b	Permanent endowment	%							
С	, , , , , , , , , , , , , , , , , , , ,	%							
_	The percentages on lines 2a, 2b, and 2c should	ıld equal 100%.							
За	Are there endowment funds not in the posses	ssion of the organiza	tion that are held ar	nd administered for	the organiza	ation			
	uy.							Yes	No
	(i) unrelated organizations			************************			3a(i)	Х	
	(ii) islated organizations						3a(ii)		X
b	" Too on the bally, are the related organizat	ions listed as require	ed on Schedule R?		• • • • • • • • • • • • • • • • • • • •		3b		
	Describe in Fait Ain the intended uses of the	organization's endov	vment funds.						
· ·	= unanigo, and Equipme								
***	Complete if the organization answered			ee Form 990, Part	X, line 10.		-		
	Description of property	(a) Cost or other basis (investment)	, (~,	(0)	Accumulated epreciation	i	(d) Book	value	8
1a	Land				~p.00(401)				
b	Buildings								
С	Leasehold improvements				······································				
d	Equipment		1	0,536.	6,96	1) E	75.
<u>e</u>	Other				0,90			,, 5	15.
Total	. Add lines 1a through 1e. (Column (d) must eq	ual Form 990, Part X	(, column (B), line 1	Oc.)				2 5	75.

(b) Book value
·····

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

<u>1.</u>	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	PAYROLL TAXES PAYABLE	3,936.
(3)	OTHER LIABILITIES	3,491.
(4)		
(5)		***************************************
(6)		
(7)		
(8)		
(9)		
	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	7,427.

^{2.} Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

-	dule D (Form 990) 2018 LUTHERAN ELEMENTARY SCHOOL	ASSO	CIATION	43-	1853158 Page 4
Pai	Reconciliation of Revenue per Audited Financial Stateme	nts With	n Revenue per R	leturr	1.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1 2	Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12:			1	1,202,694.
a	Net unrealized gains (losses) on investments	10-1			
b	Donated services and use of facilities	2a 2b		-	
С	Recoveries of prior year grants	2c	· · · · · · · · · · · · · · · · · · ·	1	
d	Other (Describe in Part XIII.)	2d	-97,993.	1	
е	Add lines 2a through 2d			2e	-97,993.
3	Subtract line 2e from line 1			3	1,300,687.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	83,931.		
C	Add lines 4a and 4b			4c	83,931.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,384,618.
Pai	t XII Reconciliation of Expenses per Audited Financial Stateme	ents Wit	h Expenses per	Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1 2	Total expenses and losses per audited financial statements			1	1,050,631.
∠ a	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1			•
b	Donated services and use of facilities	2a			
c	Prior year adjustments Other losses	2b		-	
_	Other (Describe in Part XIII.)	2c 2d	74,008.	1	
е	Add lines 2a through 2d	20		2e	74,008.
3	Subtract line 2e from line 1			3	976,623.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	*************			3,0,023.
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	83,931.		
С	Add lines 4a and 4b			4c	83,931.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	1,060,554.
	t XIII Supplemental Information.				
Provid	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I	V, lines 1b	and 2b; Part V, line	4; Part	X, line 2; Part XI,
ines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addit	ional infor	mation.		
Par	ct V, line 4:				
	0 1/ 1110 1.				
TO	PROVIDE FUTURE FUNDING FOR THE ORGANIZATION	יוא ב זאו	מכעווז. אם פע	TDC	₽∩D
		11 1111	DCHODARDH	TID	FOR
CHI	LDREN AT LUTHERAN SCHOOLS.				

<u>Par</u>	t X, Line 2:	****			
m1					
Tne	e Association is exempt from income taxes p	ursua	nt to sect	ion	501(c)(3)
٥f	the Internal Bernaus G				
OT	the Internal Revenue Service Code. Theref	ore,	no provisi	on :	is made for
tav	es on income.				
can	es on income.				
***************************************					***************************************
The	Association adopted the provisions of Acc	ounti	ng for IInc	ert:	ainty in
	OF TOTAL OF THE PROPERTY OF TH		LIG LOT OHO	<u> </u>	ALLICY LLL
Inc	come Taxes on July 1, 2010. The adoption o	of tha	t quidance	res	sulted in
no	change to the financial statements for pri	or pe	riods. As	_of	June 30,
	10-29-18				lule D (Form 990) 2018

Schedule D (Form 990) 2018 LUTHERAN ELEMENTARY SCHOOL ASSOCIATION 43-185 Part XIII Supplemental Information (continued)	3158 Page 5
2015, no amounts have been recognized for uncertain tax positions.	The
Association's tax returns filed prior to fiscal 2016 are closed.	
Part XI, Line 2d - Other Adjustments:	
ADD'L FUNDRAISING REVENUE NETTED WITH EXPENSES ON PG 1	74,008.
UNREALIZED LOSS ON INVESTMENTS	<u>-172,001.</u>
Total to Schedule D, Part XI, Line 2d	-97,993.
Part XI, Line 4b - Other Adjustments:	
INVESTMENT FEES	72,318.
DONOR ENDOWMENT ALLOCATIONS	11,613.
Total to Schedule D, Part XI, Line 4b	83,931.
Part XII, Line 2d - Other Adjustments:	
FUNDRAISING EXPENSES NETTED WITH REVENUE ON PG 1	74,008.
Part XII, Line 4b - Other Adjustments:	
INVESTMENT FEES	72,318.
DONOR ENDOWMENT ALLOCATIONS	11,613.
Total to Schedule D, Part XII, Line 4b	83,931.

	· · · · · · · · · · · · · · · · · · ·

SCHEDULE G

Department of the Treasury

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No. 1545-0047

Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

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

Inspection

Name of the organization Employer identification number LUTHERAN ELEMENTARY SCHOOL ASSOCIATION 43-1853158 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Internet and email solicitations Solicitation of government grants Phone solicitations С Special fundraising events In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (or retained by) (iii) Did fundraiser (i) Name and address of individual (vi) Amount paid (iv) Gross receipts fundraiser have custody (ii) Activity to (or retained by) or entity (fundraiser) from activity fundraiser or control of contributions? organization listed in col. (i) Yes No 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Sch	nedu art	ll Fundraising Events Complete it	AN ELEMENTARY	SCHOOL ASSO	CIATION 43-	1853158 Page 2
		II Fundraising Events. Complete if the of fundraising event contributions and gr	ne organization answered ross income on Form 990	d "Yes" on Form 990, Pa DEZ, lines 1 and 6b. List	rt IV, line 18, or reported events with aross receir	more than \$15,000 ots greater than \$5.000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			AUCTION	EATT FIXEDAM		(add col. (a) through
a)			(event type)	FALL EVENT (event type)	(total number)	col. (c))
Revenue						
Вè	1	Gross receipts	229,024.	108,764.	952.	338,740.
	2	Less: Contributions	229,024.	108,764.	952.	338,740.
				100//011	334.	330,740.
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
S	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	-118.4			
E S	7	Food and beverages				
Ö					AND THE STREET STREET,	
	8	Entertainment	40.000			
	9 10	Other direct expenses	43,370.	24,000.	6,638.	74,008.
	1	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from li	ine 3. column (d)		>	74,008. -74,008.
Pa	ırt I	II Gaming. Complete if the organization	answered "Yes" on Form	990, Part IV, line 19, or	reported more than	- /4,000.
		\$15,000 on Form 990·EZ, line 6a.	T			
ne			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add
Revenue				birigo/progressive birigo		col. (a) through col. (c))
<u> </u>	1	Gross revenue				
		Cook asing				
ses	2	Cash prizes				
xper	3	Noncash prizes				
irect Expenses	4	Rent/facility costs				1000
۵		O				
	5	Other direct expenses				
	6	Volunteer labor	Yes %	Yes % No	Yes % No	
					NO	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		>	
	8	Net gaming income summary. Subtract line 7	from line 1 column (d)		_	
		January, edotract into 7	morn wife 1, column (a)			
9	Ent	er the state(s) in which the organization condu	ucts gaming activities:			
a h	is th	ne organization licensed to conduct gaming ac	ctivities in each of these s	states?		Yes No
b	" '	No," explain:				
10a	We	re any of the organization's gaming licenses re	evoked, suspended, or te	rminated during the tax	year?	Yes No
b	1(")	Yes, " explain:			Administration .	

Scr	nedule G (Form 990 or 990 EZ) 2018 LUTHERAN ELEMENTARY SCHOOL ASSOCIATION 43-	1853158	Page 3
77	Does the organization conduct gaming activities with nonmembers?	Yes	No
12	is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	□ No
13	Indicate the percentage of gaming activity conducted in:		
a	The organization's facility	13a	0/
b	An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	100	%
	Name ►		
	Address >		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party > \$		
С	If "Yes," enter name and address of the third party:		
			······································
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation > \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
h	retain the state gaming license? Enter the amount of distributions required under state law to be distributed to other assessment are size time.	Yes	L No
	and state law to be distributed to other exempt organizations or spent in the		
Par	organization's own exempt activities during the tax year \$ t IV Supplemental Information. Provide the explanations required by Part Libra 3b, columns (iii) and (a) and D	**************************************	
	t IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	rt III, lines 9,	9b, 10b,

Schedule G	i (Form 990 or 990-EZ)	LUTHERAN	ELEMENTARY	SCHOOL	ASSOCIATION	43-1853158	Pane 4
Part IV	Supplemental Info	rmation (continue	d)		ASSOCIATION		1 490 4
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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

▶ Attach to Form 990.

OMB No. 1545-0047	2018	Open to Public	nspection

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

å Employer identification number Schedule I (Form 990) (2018) 43-1853158 (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. LUTHERAN ELEMENTARY SCHOOL ASSOCIATION (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government Name of the organization Part I Part II

LUTHERAN ELEMENTARY SCHOOL ASSOCIATION Schedule I (Form 990) (2018)

Page 2

43-1853158

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part III

(f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) to families fill out the Family Scholarship Application online. LESA's Board Part IV | Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information Lutheran elementary schools in the metropolitan St. Louis area. Eligible reviews the submitted applications and notifies the school administrator Building Blocks Scholarship Fund offers need-based financial assistance children from economically disadvantaged families who wish to attend (d) Amount of non-cash assistance ċ o Ö (c) Amount of cash grant 454,328 35,000 25,500 of the award determination. 543 15 87 (b) Number of recipients LESA'S BUILDING BLOCK SCHOLARSHIP FUND (a) Type of grant or assistance MISSOURI DISTRICT SCHOLARSHIP FUND CHRISTIAN FRIENDS OF NEW AMERICANS families Part I, Line 2: and the

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

Inspection

Employer identification number

LUTHERAN ELEMENTARY SCHOOL ASSOCIATION 43-1853158 Part I Types of Property (a) (b) (d) Number of Check if Noncash contribution Method of determining contributions or applicable amounts reported on noncash contribution amounts items contributed Form 990, Part VIII, line 1g Art - Works of art 1 Art - Historical treasures 2 Art - Fractional interests 3 Books and publications 4 Clothing and household goods 5 Cars and other vehicles 6 Boats and planes _____ 7 Intellectual property 8 Securities · Publicly traded 9 Securities - Closely held stock 10 Securities - Partnership, LLC, or 11 trust interests Securities · Miscellaneous 12 Qualified conservation contribution · 13 Historic structures Qualified conservation contribution - Other 14 Real estate - Residential 15 Real estate · Commercial 16 Real estate - Other 17 Collectibles 18 Food inventory 19 Drugs and medical supplies _____ 20 Taxidermy 21 Historical artifacts 22 Scientific specimens 23 Archeological artifacts 24 (AUCTION ITEMS) 25 Other -109,450 Х 0.FAIR MARKET VALUE 26 Other 27 Other 28 Other Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? X 30a b If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Х 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a X b If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.qov/Form990 for the latest information.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

LUTHERAN ELEMENTARY SCHOOL ASSOCIATION

Employer identification number 43-1853158

Form 990, Part III, Line 4d, Other Program Services:
Provided services to schools to assist in providing sustainable and
high-quality instruction for the children we serve. Services provided
included joint marketing of member schools through various media
platforms, professional development to staff in the areas of marketing
and student recruitment and retention, educator access to Colonial
Williamsburg Summer Teacher Institute, support to maintain National
Lutheran School Accreditation, establishing a new teacher mentor
program, providing development grants to schools to address specific
educator needs, and establishing a natural gas aggregation program to
provide fuel savings for member schools.
Expenses \$ 308,154. including grants of \$ 0. Revenue \$ 0.
Form 990, Part VI, Section B, line 11b:
The annual independent review and the Form 990 are both distributed to each
member of the Board of Directors at a regular meeting of the Board. Members
then review the material and ask questions before the 990 is filed.
Form 990, Part VI, Section B, Line 12c:
Board members are asked to complete and sign a disclosure statement
annually. The signed statement includes the Board of Directors' Conflict
of Interest Policy. Members are then expected follow the
Implementation/Procedure included in the policy and recuse themselves
should a conflict arise. The Board of Directors Chairman and the
association's Executive Director also monitor proceedings and will prompt
any member that might forget to recuse themselves as needed. Any instance LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2018)

Schedule O (Form 990 or 990-EZ) (2018)	Page
Name of the organization LUTHERAN ELEMENTARY SCHOOL ASSOCIATION	Employer identification number 43-1853158
of recusal would be noted in the minutes of the meeting.	
Form 990, Part VI, Section B, Line 15a:	
The process for determining the compensation of key empl	oyees, including
the Executive Director, has been delegated by the Board	
Executive Committee of the Board. The committee reviews	
compensation material. The committee is expected to rea	
document their decisions in writing and to communicate t	
full Board of Directors.	
Florer 000 P. J	
Form 990, Part VI, Section C, Line 19:	
The agency keeps both hard copy and digital copies of ea	
document. Copies can be viewed on the Organization's we	bsite or are
provided free of charge for individual requests.	
FORM 990, PART XII, LINE 2C	
THE SELECTION AND OVERSIGHT PROCESS DID NOT CHANGED DURI	NG THE CURRENT
FISCAL YEAR ENDED.	
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