

1.) CORPORATION NAME:

**MISSION INVESTMENT FUND OF THE
EVANGELICALLUTHERAN CHURCH IN AMERICA**

DUE DATE: **7/31/2013**

SCC ID NO: **F0580888**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

MN

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 8765 W HIGGINS RD

CITY/ST/ZIP: CHICAGO, IL 60631

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	EVA ROBY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	8765 W HIGGINS ROAD		
CITY/ST/ZIP/CO:	CHICAGO, IL 60631		

NAME:	ROBERT J BENSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/TREAS		
ADDRESS:	8765 W HIGGINS RD		
CITY/ST/ZIP/CO:	CHICAGO, IL 60631		

NAME:	FRANK TORRES	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/CONT		
ADDRESS:	8765 W. HIGGINS ROAD		
CITY/ST/ZIP/CO:	CHICAGO, IL 60631		

NAME:	Daniel Bringman	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	115 Longview Blvd.		
CITY/ST/ZIP/CO:	Gettysburg, PA 17325		

NAME:	John Spear	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	8765 W Higgins Road		
CITY/ST/ZIP/CO:	Chicago, IL 60631		

NAME:	Miji Bell	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PO Box 3144		
CITY/ST/ZIP/CO:	Durham, NC 27715		

NAME: Kendra Brodin TITLE: DIRECTOR ADDRESS: 989 Chatsworth Place CITY/ST/ZIP/CO: Shoreview, MN 55126	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: Warren Hanson TITLE: DIRECTOR ADDRESS: 332 Minnesota Street Suite 1201 CITY/ST/ZIP/CO: Saint Paul, MN 55101	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: Mark Helmke TITLE: DIRECTOR ADDRESS: 415 Oakleaf Dr CITY/ST/ZIP/CO: San Antonio, TX 78209	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: Lorenz Lutey TITLE: DIRECTOR ADDRESS: 647 W Virginia St Suite 300 CITY/ST/ZIP/CO: Milwaukee, WI 53204	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: Harold Mueller TITLE: DIRECTOR ADDRESS: 2340 White Stable Road CITY/ST/ZIP/CO: St. Louis, MO 63131	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: Roger Southward TITLE: DIRECTOR ADDRESS: 9165 Winston Road CITY/ST/ZIP/CO: Pickerington, OH 43147	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: Julie Swanson TITLE: DIRECTOR ADDRESS: 2609 McVitty Road CITY/ST/ZIP/CO: Roanoke, VA 24018	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: Viviane Thomas-Breifeld TITLE: DIRECTOR ADDRESS: 1300 W Greenfield Ave CITY/ST/ZIP/CO: Brookfield, WI 53005	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.	
/s/ ROBERT J BENSON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	ROBERT J BENSON, VP/TREAS PRINTED NAME AND CORPORATE TITLE
7/1/2013 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.	