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DLN: 93493132035961

# $_{\text{Form}}990$

Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

Open to Public

A Fo	r the 2	2009 cal	lendar yea	ır, or tax year begi	nning 07-01-2009	and ending 06-30-	2010						
<b>B</b> Che	ck if ap	pplicable	Please	C Name of organizati MESSIAH COLLEGE	on				D Employer	ident	ification number		
☐ Add	ress ch	ange	use IRS label or						23-1352				
┌ Nar	ne char	nge	print or	Doing Business As					E Telephone	numl	ber		
┌ Inıt	al retur	rn	type. See Specific	Number and street	(or P.O. boy if mail is	s not delivered to street a	ddress) Do	om/suite	(717) 76	6-25	11		
☐ <sub>Ter</sub>	mınated	d	Instruc- tions.	ONE COLLEGE AVE	(OFF O BOX II IIIdii is	s not delivered to street a	ludicss) Ko	only suite	<b>G</b> Gross recei	pts \$ 1	.12,179,165		
_	ended r			City or town, state	or country, and ZIP +	- 4							
_		pending		GRANTHAM, PA 17		7							
i Abb	nication	pending											
				me and address of PHIPPS	principal officer		H(a	ı <b>)</b> Is th affilia	is a group ret	urn fo	or □ Yes <b>▽</b> No		
				OLLEGE AVE				dillile			1 163 1 110		
			GRANT	THAM,PA 17027			H(b	•	l affiliates inc		·		
	r-exem	int status	<b>▽</b> 501/c	) ( 3 ) <b>- (</b> (insert no )				_		-	ee instructions)		
				essiah edu	1 4947(a)(1) 01 1	327	H(c	) Grou	ıp exemption	numt	oer 🟲		
				tion Trust Associ	ention C Othor <b>b</b>		1	voor of fo	rmation 1909	M C	tate of legal domicile PA		
	rt I			tion i nust i Associ	ation other F			real of to	illiation 1909	M 3	ate of legal doffficile PA		
Governance		Messiah characte and appl districts Philadel	College per, and Chi lied arts ai and litera phia and h	ristian faith for app nd sciences, that c icy outreach progra	-educational unde froximately 2,900 conducts research ams The college participation in fo	ergraduate and gradu students in a reside n on critical educatio is also involved in co reign studies, interna	ential setti n issues a ommunity	ng Mes ind has outreac	sıah College numerous pa h programs ıı	ıs a o rtners n Har	college of the liberal ships with school risburg and		
	2	Check th	hıs box ►F	if the organizatio	on discontinued its	s operations or dispo	sed of mo	re than	25% of its n	et ass	sets		
Activities &			,			t VI, line 1a)					29		
IM .						ng body (Part VI, lin					23		
Ş V				nployees (Part V , I			,			_	3,278		
				olunteers (estimate	,						255		
	7a	Total gro	oss unrela	ted business revei	nue from Part VII	I, column (C), line 12	2			7a _	-12,916		
	b	Net unre	lated busi	ıness taxable ıncoı	me from Form 990	)-T, line 34				7b	0		
								Prio	r Year		Current Year		
	8	Contrib	outions and	d grants (Part VIII	(, lıne 1h)				10,636,207	,	10,700,056		
ПЩE	9	Progran	m service	revenue (Part VIII	I, line 2g)			91,897,109	,	97,507,906			
Rayenue	10	Investr	ment incor	me (Part VIII, colu	ımn (A), lınes 3, 4	, and 7d )	·		1,920,680		3,515,061		
	11		•	, ,		, 9c, 10c, and 11e)			1,851,544	1	446,445		
	12			_		art VIII, column (A)	, line		106,305,540		112,169,468		
	13					), lines 1-3 )			23,994,870	,	25,866,134		
	14					line 4)			(	+	0		
	15	Salarıe	s, other co	ompensation, empl	oyee benefits (Pa	rt IX, column (A), lın	es 5-						
8		10)							46,189,292	+	46,919,647		
Expenses	16a					ne 11e)	·		(		0		
五	Ь			enses (Part IX, columr			-			+			
	17					,11f-24f)			33,352,250	+	34,762,428		
	18					X, column (A), line 2			103,536,412	+	107,548,209		
_ 97	19	Kevenu	ie iess exp	penses Subtract II	ne 18 from line 1.	2		aginnin	2,769,128 g of Current	1	4,621,259		
Not Assets or Fund Balances							6	_	ear		End of Year		
SS 6 3 afa	20	Total a	ssets (Par	rt X, line 16)					271,965,779		283,826,412		
RA E	21	Total lı	abılıtıes (F	Part X, line 26) .					84,713,190		79,322,041		
źΞ	22	Netass	sets or fun	nd balances Subtra	act line 21 from li	ne 20			187,252,589	9	204,504,371		
Par	t II	Signa	ature Blo	ock									
						eturn, including accompar rer (other than officer) is							
Sign Here		Lois V	ture of office loigt Vice Pre or print nam	esident for Finance	05-11								
		Preparer's	s <b>k</b>			Date	Check if	f	Preparer's ide		ng number		
Paid		signature					self- empolye	ed • 🗀	(see ınstructı				
Prepa	arer's	Firm's name (or yours											
Use (		if self-employed), address, and ZIP + 4								- EIN ▶			
	-	dau(c35, 6	GING ZIF T H						Phone no 🕨	Phone no 🕨			
May t	he IRS	I S discus:	s this retu	rn with the prepare	er shown above? (	see instructions) .				Γ	Yes No		

#### Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

Messiah College provides private co-educational undergraduate and graduate education that effectively integrates intellect, character, and Christian faith for approximately 2,900 students in a residential setting. Messiah College is a college of the liberal and applied arts and sciences, that conducts research on critical education issues and has numerous partnerships with school districts and literacy outreach programs. The college is also involved in community outreach programs in Harrisburg and Philadelphia and has strong student participation in foreign studies, international service mission projects, and foreign cross-cultural educational experiences in lesser developed countries

						Form <b>990</b> (2009
4e	Total program service	expenses <b>⊧</b> -\$	97,071,56	8		
	(Expenses \$	0 inc	:luding grants o	f \$	O ) (Revenue \$	0 )
4d	Other program service	es (Describe in Sch	nedule O )			
4c	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	)
4b	(Code	) (Expenses \$		ıncludıng grants of \$	) (Revenue \$	)
4a	Post Secondary Education	) (Exhelises \$	97,071,308	including graffes of \$	23,000,134 ) (Revenue \$	37,450,203 J
4-	Section 501(c)(3) and 9 allocations to others, the				are required to report the am service reported 25,866,134 ) (Revenue \$	ount of grants and 
4	Describe the exempt pu	irpose achievemen	ts for each of th		largest program services by	
	services? If "Yes," describe these					j fes jº No
3	Did the organization cea				nducts, any program	┌ Yes ┌ No
	If "Yes," describe these	new services on S	chedule O			
2	the prior Form 990 or 9				which were not listed on	┌ Yes ┌ No

Dart TV	Checklist	of Required	Schedules
4 ILT 1/4	CHECKHSL	ui keuulleu	<b>Scheuules</b>

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 💋	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Νo
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D,  Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ 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.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	Į		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νο
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		Νο
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νο
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Νο
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	_
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Schedule N, Part II	32		Νο
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		Νο
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		Νο
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm <b>990</b>	(2009)

art V	Statements	Regarding	Other IF	RS Filings	and Tax	Compliance
-------	------------	-----------	----------	------------	---------	------------

			Yes	No						
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		-							
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0									
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1</b> c	Yes							
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  Statements filed for the calendar year ending with or within the year covered by this return									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes							
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes							
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes							
4a										
Ь	If "Yes," enter the name of the foreign country  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts									
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No						
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No						
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c								
6a										
b	<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?									
7	Organizations that may receive deductible contributions under section 170(c).									
	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	Yes							
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes							
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N o						
	· · · · · · · · · · · · · · · · · · ·									
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νο						
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	Yes							
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	Yes							
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8								
9	Sponsoring organizations maintaining donor advised funds.									
а	Did the organization make any taxable distributions under section 4966?	9a								
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b								
10	Section 501(c)(7) organizations. Enter									
а	Initiation fees and capital contributions included on Part VIII, line 12 10a									
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities									
11	Section 501(c)(12) organizations. Enter									
а	Gross income from members or shareholders									
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )									
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year									

One College Ave Box 3010

Grantham, PA 17027 (717) 766-2511

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

	processes, or changes in Schedule O. See Instructions.			
Se	ection A. Governing Body and Management		<b>V</b>	NI-
			Yes	No
1a	Enter the number of voting members of the governing body			
ь	Enter the number of voting members that are independent 1b 23			
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	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		No
4	supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its organizational documents since the prior Form 990 was			NO .
	filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6 -	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νο
	ction B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)	1		
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		N o
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990		163	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	Yes	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13		Νο
14	Does the organization have a written document retention and destruction policy?	14		Νο
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions )			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes	
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b	Yes	
	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ►PA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website.  Another's website.  Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of th	e orga	ınızatıor	n 🕨
	Lois J Voigt			

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

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees. 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
<b>(A)</b> Name and Title	(B) Average hours	Posi t	<b>(C</b> tion ( hat a	ched	ckal )	I		( <b>D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of other
	per week	Institutional Trustee Individual trustee or director		Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

<b>1</b> b	Total .									•	1,437,932	0	303,990

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization -6

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

#### **Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation						
BCA Study Abroad 50 Alpha Drive Elizabethtown, PA 17022	External Programs Services	1,443,289						
Temple University 1801 Broad Street Philadelphia, PA 19122	Philadelphia Campus Instruction	1,159,670						
Musser Mechanical Inc 9100 Garnes Road Mercersburg, PA 17236	Eisenhower Campus Center Renovation	796,597						
Greenfield Architects LTD 1853 William Penn Way Lancaster, PA 17601	Planning & Design for High Center	756,301						
SERVPRO of New Cumberland - Carlisle 107 N Market Street Mechanicsburg, PA 170553340	Flood Cleanup & Restoration	380,839						
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►36								

Page 8

112,169,468

99,435,168

	990 (2009)				Page <b>10</b>
Pari	IX Statement of Functional Expenses				
Δ	Section $501(c)(3)$ and $501(c)(4)$ organizations m Il other organizations must complete column (A) but are not required to			(D)	
	ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21				<u> </u>
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	25,866,134	25,866,134		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and	1,437,932	000 354	200.467	170 211
6	key employees Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	1,437,932	969,254	290,467	178,211
7	Other salaries and wages	33,052,575	28,311,148	3,754,959	986,468
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,159,982	1,825,874	261,239	72,869
9	Other employee benefits	7,738,841	6,903,128	668,080	167,633
10	Payroll taxes	2,530,317	2,162,638	<del>                                     </del>	82,953
11	Fees for services (non-employees)	, ,			<u> </u>
а	Management	1,697,887	1,161,237	470,102	66,548
ь	Legal	157,552		157,246	306
С	Accounting	59,810		59,810	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	542,603		542,603	
g	Other	311,713		<del>                                     </del>	6,319
12	Advertising and promotion	579,983	· ·	<del>                                     </del>	59,285
13	Office expenses	1,339,997	1,098,266	<del>                                     </del>	36,326
14	Information technology	485,060		<del>                                     </del>	17,357
15	Royalties	7,005	7,005	<del>                                     </del>	,
16	Occupancy	244,570	225,183	<del>                                     </del>	37,238
17	Travel	2,368,277	2,121,961	<del>                                     </del>	71,977
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	, ,	, ,	,	· ·
19	Conferences, conventions, and meetings	262,616	230,974	21,005	10,637
20	Interest	1,946,963	1,808,705	138,258	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	8,870,949	8,568,324	302,625	
23	Insurance	535,698	16,110	519,588	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )				
а	Tuition for External Programs	3,797,059	3,797,059	0	0
b	Utilities	3,547,610	3,545,470	1,771	369
С	Purchases for Resale	4,220,341	3,891,715	328,626	0
d	Equipment Service and Repair	1,005,910	883,451	107,332	15,127
e	Facility Service and Repair	479,037	504,147	-15,280	-9,830
f	All other expenses	2,301,788	2,106,647	17,724	177,417
25	Total functional expenses. Add lines 1 through 24f	107,548,209	97,071,568	8,499,431	1,977,210
26	Joint costs. Check here ► ☐ If following SOP 98-2  Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet (A) (B) End of vear Beginning of year ol 0 1 1 Cash—non-interest-bearing . . . . . . . . . . . . 20,464,283 2 20.715.036 2 5,364,005 6,920,050 3 3 4 1.292.025 1.780.324 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of ol 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 0 6 0 2,875,210 Notes and loans receivable, net . . . . . 3,017,144 425,963 Inventories for sale or use . . . . . . 929.814 1,092,933 624.300 Land, buildings, and equipment cost or other basis Complete 222.084.025 10a 10a Part VI of Schedule D 10b 113.678.801 109.909.341 108.405.224 b Less accumulated depreciation . . . . . 10c 100.299.124 126.945.433 11 11 4,494,172 12 12 Investments—other securities See Part IV, line 11 . . . . . . . . . 0 13 13 Investments—program-related See Part IV, line 11 . . 14 0 14 26.217.356 15 14.020.454 15 16 271,965,779 16 283,826,412 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 4.381.749 17 6,391,789 17 Accounts payable and accrued expenses 0 18 18 309,462 19 390,426 19 57,303,915 54,533,381 20 20 Liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 0 0 22 0 0 23 23 Secured mortgages and notes payable to unrelated third parties . . 0 0 24 Unsecured notes and loans payable to unrelated third parties . . . . 24 22.718.064 25 Other liabilities Complete Part X of Schedule D . . . . . 25 18.006.445 26 Total liabilities. Add lines 17 through 25 . . . . . 84,713,190 79,322,041 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 147,243,766 165,104,088 27 27 Unrestricted net assets . . . . 28 18.640.778 28 16.956.024 Temporarily restricted net assets . . . . . Fund 21.368.045 29 22 444 259 29 Permanently restricted net assets . . . . . Organizations that do not follow SFAS 117, check here 📂 🥅 and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds . . . Assets 31 Paid-in or capital surplus, or land, building or equipment fund . . . . . 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 187,252,589 204,504,371 33 Total net assets or fund balances . . . . 33 Total liabilities and net assets/fund balances . . . . . 34 271.965.779 283.826.412 34

Part XI	Financial Statements	and	Reporting

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

Form **990** (2009)

OMB No 1545-0047

## **SCHEDULE A** (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

MESSIAH COLLEGE

Name of the organization

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

**Public Charity Status and Public Support** 

Attach to Form 990 or Form 990-EZ. See separate instructions.

Inspection **Employer identification number** 

23-1352661

	_								23-133200			
	rt I			olic Charity Stat						tructions		
he o	organı:			foundation because					x )			
1	Г	A church, convention of churches, or association of churches section 170(b)(1)(A)(i).										
2	굣	A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E)										
3	Г	A hospi	tal or a coop	erative hospital serv	/ice organiza	atıon descri	bed in <b>sectio</b> i	n 170(b)(1)	(A)(iii).			
4	Γ	A medical research organization operated in conjunction with a hospital described in <b>section 170(b)(1)(A)(iii).</b> Enter the hospital's name, city, and state										
5	Г	_	•	rated for the benefit	<del>-</del>	or universit	y owned or op	perated by a	governmental	unıt descrıb	— ed ın	
_	_			<b>()(iv).</b> (Complete Pa	-							
6				ocal government or	_							
7	ı	describe	ed ın	t normally receives a <b>\)(vi)</b> (Complete Pa		part of its	support from	a governme	ntal unit or froi	m the genera	l public	
8	Г			described in <b>section</b>		.)(vi) (Con	nplete Part II	)				
9	Ė			normally receives					outions, membe	ership fees, a	nd gro	s s
	·			ties related to its ex								
		•		ss investment incom	-	<del>-</del>						
			_	anızatıon after June 3				-		•		
10	Г	•		anized and operated	•			•	•			
11	Γ	An orga one or n the box	nızatıon orga nore publicly	anized and operated supported organizates the type of supported by Type II	exclusively tions describ rting organiz	for the bene bed in secti zation and c	efit of, to perfo on 509(a)(1)	orm the func or section ! s 11e throug	tions of, or to 509(a)(2) See gh 11h	•	a)(3).	Check
e f g	Γ	other th section If the or check th Since A	an foundation 509(a)(2) rganization r his box ugust 17, 20	x, I certify that the or in managers and othe eceived a written de 206, has the organiz	er than one c	r more pub	licly supporte	d organizat Type I, Type	ions described	ın section 5	09(a)(	1) or
			g persons? rson who dire	ectly or indirectly co	ntrols, eithe	ralone ort	oaether with r	ersons des	cribed in (ii)		Yes	No
				overning body of the	•				011200 III (II)	11g(i)	103	110
			_	r of a person describ		_				11g(ii)		
		` '	•	ed entity of a person	` ,		hove?			11g(iii)		
h		• •		g information about t		., .,				[==5()	<u> </u>	<u> </u>
				<b>3</b>		· <b>y</b> - · · · - · ·	, ,					
(i) Name of supported organization		e of rted	(ii) EIN	(iii)  Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizati col (i) list your gove docume	ion in ted in rning	(v) Did you no organiza col (i) o suppo	otify the tion in f your	(vi) Is th organizat col (i) org in the U	e ıon ın anızed	A m	<b>vii)</b> ount of oport?
				instructions))			Yes	No	No			
Tata												

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	÷·/		
	endar year (or fiscal year beginning	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	( <b>b)</b> 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	organization's benefit and either						
	paid to or expended on its						
	behalf						
3	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
_	(f) <b>Dublic Support</b> Subtract line F from						
6	<b>Public Support.</b> Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	( <b>b</b> ) 2000	(6) 2007	(d) 2008	(e) 2009	(1) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income (Explain in Part						
	IV ) Do not include gain or loss						
	from the sale of capital assets						
11	Total support (Add lines 7						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and <b>stop here</b>						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
<b></b>	and <b>stop here.</b> The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	<b>▶</b> □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and <b>stop here.</b> The organization				,		▶
17a	10%-facts-and-circumstances test-	<b>-2009.</b> If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ration qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						<b>▶</b> ┌
10	Deiveta Farmdation Ifthe averages	on did not obselv	a hay an line 12	16- 16- 17-	17	hay and cas	•

**▶**□

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support				1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	( <b>d)</b> 2008	(e) 2009	<b>(f)</b> Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt						
3	purpose Gross receipts from activities that				+		
3	are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5				-		
7a	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6 )						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	<b>(c)</b> 2007	( <b>d)</b> 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
11	business activities not included						
	ın lıne 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support (Add lines 9, 10c,						
14	11 and 12 ) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and <b>stop here</b>	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	<b>▶</b> ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	<b>009</b> (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	<b>2008</b> Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind <b>stop here.</b> T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes been	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(	us more man 33	1/370 and ine

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

**Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

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OMB No 1545-0047

2009

Open to Public Inspection

# SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

**Employer identification number** Name of the organization MESSIAH COLLEGE 23-1352661 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ┌ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a

d	Number of conservation easements included in (c) acquired after 8/17/06	2d			
3	Number of conservation easements modified, transferred, released, extinguished, or terminate	d by th	e organization during	)	
	the taxable 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, hand enforcement of the conservation easements it holds?	dling of		Yes	┌ No
6	Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easem	nents d	uring the year ►		
7	A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements	s during	g the year ► \$		
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of sec $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$ ?	tion	Г	Yes	┌ No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and balance sheet, and include, if applicable, the text of the footnote to the organization's financial the organization's accounting for conservation easements	•	,		

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

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

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
  - (i) Revenues included in Form 990, Part VIII, line 1

    (ii) Assets included in Form 990, Part X
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the
- following amounts required to be reported under SFAS 116 relating to these items
- Revenues included in Form 990, Part VIII, line 1

  Assets included in Form 990, Part X

Total acreage restricted by conservation easements

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

2b

2c

ar	<b>TITL</b> Organizations Maintaining Co	diections of Art	, HISTOR	icai ire	asures, or	Otne	er Similar	ASSE	ets (co	ntınued)
3	Using the organization's accession and other items (check all that apply)	r records, check any	of the fo	llowing th	at are a sıgnıfı	cant (	use of its co	llection	n	
а	Public exhibition		d [	Loan or	exchange pro	grams	5			
b	Scholarly research		е Г	Other						
c	Preservation for future generations									
	Provide a description of the organization's c Part XIV	ollections and expla	ın how th	ey further	the organizati	on's e	xempt purp	ose in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than						nılar	Г	Yes	√ No
Pai	t IV Escrow and Custodial Arrang					ed "\	es" to For	m 990	),	
	Part IV, line 9, or reported an ar									
.a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	dian or other interme	diary for	contributi	ons or other a	ssets	not	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	following	table						
						<u> </u>		A mou	ınt	
с	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
a	Did the organization include an amount on F	orm 990, Part X, line	21?					Г	Yes	┌ No
	If "Yes," explain the arrangement in Part XI									
Pa	rt V Endowment Funds. Complete	If the organization (a)Current Year		red "Yes" or Year	to Form 99 (c)Two Years B				A Four V	oars Pasis
a	Beginning of year balance	96,965,681		23,997,663	(C)TWO TEATS B	ack (C	i)Tillee Teals	Dack (e	e) Four Te	zais back
ч b	Contributions	11,013,364		2,144,190						
c	Investment earnings or losses	9,784,836	-	22,726,172						
d	Grants or scholarships	937,884		782,528						
e	· - · · · · · · · · · · · · · · · · · ·	5,195,500		5,667,472						
	and programs									
f	Administrative expenses	0		0						
g	End of year balance	111,630,497		96,965,681						
2	Provide the estimated percentage of the year		ıs							
а	Board designated or quasi-endowment 🕨	81.31 %								
b	Permanent endowment <b>18.69</b> %									
c	Term endowment 🕨 0 %									
a	Are there endowment funds not in the posse organization by	ssion of the organiza	ation that	are held a	and administer	ed for	the			N
	(i) unrelated organizations							3a(i)	Yes	No No
	(ii) related organizations							3a(ii)		No
ь	If "Yes" to 3a(II), are the related organization							3b		
ļ	Describe in Part XIV the intended uses of th	ne organization's end	lowment	funds						
aı	t VI Investments—Land, Building	s, and Equipme	nt. See	Form 990	), Part X, lın	e 10.				
	Description of investment			) Cost or oth			(c) Accumu depreciati		( <b>d</b> ) Boo	ok value
a	Land			2,192,	023	0			- :	2,192,023
b	Buildings			11,972,	515 146,6	76,182	69,57	0,275	89	9,078,422
c	Leasehold improvements				0	0		0		(
d	Equipment				0 58,5	48,262	44,10	8,526	14	4,439,736
e	Other				0 2,6	95,043		0		2,695,043

108,405,224

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12		
<ul><li>(a) Description of security or category (including name of security)</li></ul>	( <b>b)</b> Book value		od of valuation f-year market value
Financial derivatives		Cost of the o	r year market value
Closely-held equity interests			
Other			
<b>7</b> 1-1 (0-1(1) -1(1) -1(1) -1(1)			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)  Part VIIII Investments—Program Related. See		12	
			od of valuation
(a) Description of investment type	(b) Book value		f-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip			(b) Book value
Deposits with Trustee Under Debt Agreements	) CIOII		1,210,792
Beneficial Interest in Perpetual Trusts			3,204,363
Assets Held in Trust			9,325,781
Interest Receivable			279,517
Rounding Difference between 990 and F/S			1
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1			14,020,454
Part X Other Liabilities. See Form 990, Part X	7, line 25.		
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes			
Funds Held in Custody for Others	286,649		
Student Deposits	1,128,970		
Funds Held in Trust for Others	1,722,232		
US Government Grants Refundable	2,346,422		
Annuities Payable	2,139,170		
O ther Liabilities	10,383,002		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 ) ▶	18,006,445		

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	112,169,468
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	107,548,209
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	4,621,259
4	Net unrealized gains (losses) on investments	4	8,082,736
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV)	8	4,560,886
9	Total adjustments (net) Add lines 4 - 8	9	12,643,622
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	17,264,881
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	124,277,556
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines <b>2a</b> through <b>2d</b>	2e	12,108,088
3	Subtract line <b>2e</b> from line <b>1</b>	3	112,169,468
4	A mounts 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 0		
ь	Other (Describe in Part XIV) 4b 0		
c	Add lines <b>4a</b> and <b>4b</b>	4c	0
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5	112,169,468
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial	1	107,012,675
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities		
ь	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines <b>2a</b> through <b>2d</b>	2e	-535,534
3	Subtract line <b>2e</b> from line <b>1</b>	3	107,548,209
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 0		
b	Other (Describe in Part XIV) 4b		
c	Add lines <b>4a</b> and <b>4b</b>	4c	0
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18)	5	107,548,209

### Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Ident if ier	Ret urn Reference	Explanation
SchD_P03_S00_L01	Schedule D, Part III, Line 1	The College does not recognize its collections as assets in the financial statements. The College owns the Ernest L. Boyer, Sr. Archives, which were originally valued at \$500,000 when the archives were donated to the College. The College has made a commitment to preserve the archives and uses them as a resource for students at the College.
SchD_P03_S00_L04	Schedule D, Part III, Line 4	There are two main areas on campus that contain works of art of historical treasures. The Aughinbaugh Gallery is a display of student and/or employee artwork. The display challenges students to conform to a central theme or idea while still expressing creativity. Selected artwork is publicly displayed in the Gallery and rotated several times per year. The Oakes Museum of Natural Hustory directly benefits. Messiah College students by providing them with an exceptional learning environment for the sciences, arts, business and education. The museum also serves faculty with special course needs as well as provides internship and employment opportunities for students.
SchD_P05_S00_L04	Schedule D, Part V, Line 4	The college uses endowment funds to manage long-term gifts according to donor intent. In accordance with Pennsylvania law, a certain percentage of the endowment is spent per year. Some program services, operations and scholarships are funded through the investment income generated by the endowment.
SchD_P10_S00_L00	Schedule D, Part X	No FIN 48 Disclosure in Financial Statements
SchD_P11_S00_L08	Schedule D, Part XI, Line 8	Change In Value of Split Interest Agreements
SchD_P12_S00_L02d	Schedule D, Part XII, Line 2d	Change in Value of Split Interest Agreements (\$4,560,886) were presented in part XI line 8 Additionally, some expenses on the 990 are required to be presented on the financial statements as an offset to revenue Those amounts resulted in a -\$535,534 change
SchD_P13_S00_L02d	Schedule D, Part XIII, Line 2d	Some items are presented as expenses on the 990 but on the financial statements must be presented as an offset to revenue While the total effect on net income of these transactions is always zero, it does have a -\$535,534 effect on total expenses

**Employer identification number** 

### **SCHEDULE E**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

MESSIAH COLLEGE

Name of the organization

# **Schools**

►Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2009

Open to Public Inspection

	23-1352661			
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,			
	other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its			
	brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	,	\ \ \ 	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during	2	Yes	
•	the period of solicitation for students, or during the registration period if it has no solicitation program, in a way			
	that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No,"			
	please explain	3	Yes	
	Messiah College publishes the following "Notice of Nondiscriminatory Policy as to Students" in the "Patriot-News" of			
	Harrisburg, PA Messiah College admits students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not			
	discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies,			
	admissions policies, scholarship and loan programs, and athletic and other school administration programs			
4	Does the organization maintain the following?	_	,	
	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory	4ь	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	45	103	
	with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Schedule O (Form 990)			
	Does the organization discriminate by race in any way with respect to			
а	Students' rights or privileges?	5a		No
ь	Admissions policies?	5b		No
				110
c	Employment of faculty or administrative staff?	5c		Νo
a	Scholarships or other financial assistance?	5d		No
e	Educational policies?	5e		No
_				
f	Use of facilities?	5f		No
g	Athletic programs?	   5g		No.
h	Other extracurricular activities?	5h		No
	If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990)			
		-		
		1		
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
	Has the organization's right to such aid ever been revoked or suspended?	6b		Νo
	If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990) 🍠			
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05			
	of Rev Proc 75-50, 1975-2 CB 587, covering racial nondiscrimination? If "No," explain on Schedule O (Form	7	Yes	

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DLN: 93493132035961

OMB No 1545-0047

**SCHEDULE F** (Form 990)

Department of the Treasury

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions.

Open to Public **Inspection** 

Internal Revenue Service Name of the organization **Employer identification number** MESSIAH COLLEGE 23-1352661 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

		750, Part IV, III				
1	assistance, the grante	es' eligibility fo	or the grants or		the amount of the grant: lection criteria used to a 	
2	For grant makers. Descri United States	be in Part IV the	organization's pr	ocedures for monitoring th	ne use of grant funds outsıd	e the
3	Activites per Region (U	se Schedule F-1	(Form 990) if add	ditional space is needed )		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services,	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Euro	pe (including Iceland and	0	0	Program Services	3-week trips for students	398,004
	nland)				to learn and experience the cultures of Germany, the Netherlands and Spain Additional program for students to attend the Gaiety School of Acting in Ireland Finally, the International Business Institute is a 10-week program for International Business majors and other interested students to travel throughout Europe and Asia to	
					corporate sites and learn about conducting	
l <del></del>					business globally	
	ia and the newly bendent States	0	0	Program Services	International Business Institute is a 10-week program for International Business majors and other interested students to travel throughout Europe and Asia to corporate sites and learn about conducting business globally	231,770
Sub-	Saharan Africa	0	0	Program Services	3-week trips for students	130,623
					to learn and experience the cultures of Kenya and Ghana Additional field work by the Collaboratory for Strategic and Applied Partnerships in Mali and Burkina Faso to provide water to villages in those countries	
East	Asıa and the Pacıfic	0	0	Program Services	3-week trips for students in January to learn and experience the cultures of New Zealand and Thailand	125,338
Midd	le East and North Africa	0	0	Program Services	3-week trips for students to learn and experience the cultures of Israel and Cyprus	99,852
	ral America and the obean	0	0	Program Services	3-week trip for students in January to learn and experience the culture of Costa Rica	62,406
Sout	h Asıa	0	0	Program Services	3-week trip for students in January to learn and experience the culture of Nepal	47,667
	le •	0	0			1,095,660
iota	ls ▶	Ĭ	1	1	I	, -,

Part IV	, line 15, for an	sistance to Orgar y recipient who recensional	eived more than \$5	es Outside the Ur ,000. Check this box	nited States. Composite of the composite	plete if the organiza received more that	tion answered "Yes' n \$5,000	'to Form 990, ► 厂
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Enter total n tax-exempt	number of recipions by the IRS, or f	ent organizations lis or which the grante	ted above that are e or counsel has pr	recognized as chari ovided a section 50	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . ►	
3 Enter total n	umber of other	organizations or en	tities					: (Earm 990) 2009

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

Schedule F (Form 990) 2009

Identifier	ReturnReference	in Part I, line 2, and any additional information.  Explanation
	+	

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DLN: 93493132035961

OMB No. 1545-0047

(Form 990 or 990-EZ)

SCHEDULE G

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

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

Internal Revenue Service Name of the organization

Department of the Treasury

Employer identification number

MESSIAH COLLEGE Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Internet and e-mail solicitations Solicitation of government grants Special fundraising events Phone solicitations In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table /:::\ D.d

dual (ii) Activity		er have dy or rol of	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization	
	Yes	No				
		(ii) Activity  fundrais  custo  contribu  Yes	contributions?	fundraiser have custody or control of contributions?  Yes No  (iv) Gross receipts from activity	fundraiser have custody or control of contributions?  Yes No  (iv) Gross receipts from activity  (v) A mount paid to (or retained by) fundraiser listed in col (i)	

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Pa	rt II	Fundraising Events. Com more than \$15,000 on Form					eport	ed
			(a) Event #1  Student Mission Trips Fundraiser (event type)	(b) Event #2	(c) O ther Events (total number)	(d) Tot (Add col		
Revenue	1	Gross receipts	6,518	3			(	6,518
ēvē.	2	Less Charitable contributions		D				0
	3	Gross income (line 1 minus line 2)	6,518	3			(	6,518
	4	Cash prizes	(					0
မာ	5	Non-cash prizes	(					0
Expenses	6	Rent/facility costs	(					0
ă	7	Food and beverages	(		0			0
Direct	8	Entertainment			0			0
ā	9	Other direct expenses .						0
	10	Direct expense summary Add line	es 4 through 9 ın columr	(d)	🕨			0
	11	Net income summary Combine lir	nes 3, column d, and line	10			(	6,518
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	irt IV, line 19, or repo	rted mor	e than	1
Revenue			(a) Bingo	<b>(b)</b> Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Tot (Add col col		
	1	Gross revenue						
S O	2	Cash prizes						
penses	3	Non-cash prizes						
<u>ស</u> ប	4	Rent/facility costs						
Direct	5	Other direct expenses						
	6	Volunteer labor			Г Yes			
		Direct expense summary Add lines						
	8	Net gaming income summary Com	bine lines 1, column d, a	nd line 7	<u> </u>		Yes	No
9 a	Is th	er the state(s) in which the organiza he organization licensed to operate				. 9a		
b	If "N	No," Explain						
10a b		e any of the organization's gaming l (es," Explain	icenses revoked, suspei	nded or terminated during	the tax year?	10a		
11 12	Is th	s the organization operate gaming a he organization a grantor, beneficial	ry or trustee of a trust or			11		

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name 🟲		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	,	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+	
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Independent contractor		
<b>.7</b>	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent		
	in the organization's own exempt activities during the tax year ▶ \$	1	

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DLN: 93493132035961 OMB No 1545-0047

Department of the Treasury

Schedule I

(Form 990)

**Grants and Other Assistance to Organizations, Governments and Individuals in the United States** Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

Open to Public **Inspection** 

Attach to Form 990 Internal Revenue Service Name of the organization **Employer identification number** MESSIAH COLLEGE 23-1352661 Part I General Information on Grants and Assistance

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

n) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(h) Purpose of gra or assistance

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part	t IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.	

( <b>b)</b> Number of recipients	(c)A mount of cash grant	(d)A mount of	(e)Method of valuation	(f)Description of non-cash assistance
		non-cash assistance	(book, FMV, appraisal, other)	(.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
2817	25,879,230	0	Book	N/A

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Ident if ier	Return Reference	Explanation
SchI_P01_S00_L02	Schedule I, Part I, Line 2	Financial aid is awarded on the basis of need, determined using the Free Application for Federal Student Aid(FAFSA) In addition, the college offers various scholarships based on academic merit and continuing accomplishments

DLN: 93493132035961

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

**Compensation Information** For certain Officers, Directors, Trustees, Key Employees, and Highest

**Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

MES	essiah college				
		23-1352661			
Pa	art I Questions Regarding Compensation			l	l
		,		Yes	Νo
1a	Check the appropiate box(es) if the organization provided any of the following to 990, Part VII, Section A, line 1a Complete Part III to provide any relevant info				
		or residence for personal use			
		less use of personal residence			
	<u> </u>	ıb dues or ınıtıatıon fees			
	Discretionary spending account Personal services	(e g , maıd, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written p reimbursement orprovision of all the expenses described above? If "No," compl		1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expeofficers, directors, trustees, and the CEO/Executive Director, regarding the item	•	2	Yes	
3	Indicate which, if any, of the following the organization uses to establish the conorganization's CEO/Executive Director Check all that apply  Compensation committee  Written employment	t contract			
	Independent compensation consultant Compensation surv				
	Form 990 of other organizations  Approval by the bo	ard or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a or a related organization	with respect to the filing organization			
а	Receive a severance payment or change-of-control payment?		4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement	plan?	4b		Νo
c	Participate in, or receive payment from, an equity-based compensation arrange	ment?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amount	s for each item in Part III			
	Only $501(c)(3)$ and $501(c)(4)$ organizations only must complete lines 5-9.				
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization compensation contingent on the revenues of	pay or accrue any			
а	The organization?		5a		Νo
b	Any related organization?		5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization compensation contingent on the net earnings of	pay or accrue any			
а	a The organization?		6a		Νo
b	Any related organization?		6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization payments not described in lines 5 and 6? If "Yes," describe in Part III	n provide any non-fixed	7		Νo
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a subject to the initial contract exception described in Regs section 53 4958-4( in Part III		8		No
۵	If "Vac" to line 8, did the organization also follow the rebuttable presumption pro	acadura dacaribad in Dagulations			

section 53 4958-6(c)?

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name			W-2 and/or 1099-MI	SC compensation (iii) Other	(C) Retirement and other deferred	( <b>D)</b> Nontaxable benefits	<b>(E)</b> Total of columns (B)(ı)-(D)	<b>(F)</b> Compensation reported in prior	
		(i) Base compensation	incentive reportable compensation		compensation			Form 990 or Form 990-EZ	
Kım S Phipps	(I) (II)	192,324 0	0	,	o 0	l '	323,786 0	o 0	
Randall G Basınger	(I) (II)	149,485 0	0 0	_	0 0	l '	173,842 0	0	
Barry G Goodling	(I) (II)	136,902 0	0	0	0	l '	194,330 0	0 0	

## Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
	Part I, Line 1a	The President's Residence contains space for both personal and business use. The college also pays dues for one social club for the business-related use of the President and Vice Presidents. Additionally, on June 30, 2010, the College bestowed a one-time gift to Eunice Steinbrecher for her years of service as chair of the Board of Trustees. This gift was treated as a "gross-up" payment.
	Part I, Line 3	1 We participate in appropriate compensation surveys, including surveys for executive leadership compensation 2 Comparative data is used to establish an appropriate baseline 3 Based on the comparative median developed, a range of 80%-120% is established 4 The Compensation Committee of the Board of Trustees reviews the President's performance and compensation data The committee recommends a compensation package to the Board of Trustees for approval In the case of Vice Presidents, the Compensation Committee reviews the data and approves the compensation packages

Schedule J (Form 990) 2009

DLN: 93493132035961

Schedule K (Form 990)

**Supplemental Information on Tax Exempt Bonds** 

2009

OMB No 1545-0047

Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule 0 (Form 990).
Attach to Form 990.
See separate instructions.

Open to Public Inspection

Internal Revenue Service
Name of the organization
MESSIAH COLLEGE

Department of the Treasury

Bond Issues

Employer identification number

23-1352661

	Dona 1334C3	1		1			ı				1									
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date	Issued	(e) Issue	Price	(f) Des	cription of F	Purpose	<b>(g)</b> De	feased	Beha	On alf of uer						
											Yes	No	Yes	No						
A	PHEFA Revenue Bonds Series 2003 AA3	23-2243852	70917NYY4	10-23-	2003	11,8	61,190	See Schedul	e Schedule O		Schedule O		Schedule O		Schedule O			×		x
В	PHEFA Revenue Bonds Series 2005 DD1	23-2243852	70917N3Y8	05-04-	2005	31,0	82,980	See Schedul	ee Schedule O			х		х						
Pa	rt III Proceeds			'			,				•	•		1						
				Į.	4	ı	В		С		)		E							
1	Total proceeds of issue			1	1,861,190	3	1,082,98	30												
2	Gross proceeds in reserve funds				1,186,119			0												
3	Proceeds in refunding or defeasa	ince escrows		1	0,100,100	3	0,132,71	19												
4	Other unspent proceeds				0		0													
5	Issuance costs from proceeds				575,071		861,92	26												
6	Working capital expenditures from proceeds				0			0												
7	Capital expenditures from procee	eds			0		88,33	36												
8	Year of substantial completion			2006		2006				•		•								
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No						
9	Were the bonds issued as part of	f a current refunding is	ssue?	Х			х													
10	Were the bonds issued as part of	f an advance refunding	ıssue?		Х	Х														
11	Has the final allocation of procee	eds been made?		Х		Х														
12	Does the organization maintain a the final allocation of proceeds?		cords to support	Х		Х														
Pa	rt IIII Private Business Use	9		T		_														
					<u> </u>	В			:	D			E							
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	5	No						
<b>1</b>	Was the organization a partner in which owned property financed by	y tax-exempt bonds?	,		Х		X													
2					х		Х													
For	Privacy Act and Paperwork Reduction A	Act Notice, see the Inst	ructions for Form 990			Cat No 50	193E				Schedule	K (Form	990) 20	09						

Schedule K (Form 990) 2009

Part III Private Business Use (Continued)

			A	ı	В	c		D			E
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?		Х		х						
3b	Are there any research agreements with respect to the financed property which may result in private business use?		х		x						
3с	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		х		х						
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %		0 55 %		•				
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		0 %		0 %						
6	Total of lines 4 and 5		0 %		0 55 %						
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	Х		Х							
Dai	rt IV Arhitrage										

Part IV Arbitrage

			A		В		С		D		E
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		x		x						
2	Is the bond issue a variable rate issue?		Х		х						
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?		X		x						
b	Name of provider						•				
С	Term of hedge										
4a	Were gross proceeds invested in a GIC?		Х		Х						
ь	Name of provider						-				
С	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5	Were any gross proceeds invested beyond an available temporary period?		х		х						
6	Did the bond issue qualify for an exception to rebate?	Х		х							
									Cahadul	o V /Form 00/	3) 2000

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DLN: 93493132035961

OMB No 1545-0047

Open to Public

Schedule L (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

**Transactions with Interested Persons** ► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

**Inspection** 

MESSIAH COLLEGE									r identifica	tion	number	
Part I Excess Benefit Trai									s only).			
Complete if the organizat	ion ans	wered '	Yes" on Form 990	0, Par	rt IV, line 25a d	or 25	b, or For	m 990-E	Z, Part V , lı			
<b>1</b> (a) Name of disq	ualıfıed	person			<b>(b)</b> Desc	rıptı	on of trar	nsaction			<b>(c)</b> Cor	
						'					Yes	No
2 Enter the amount of tax impos	ed on t							e year un	der •••			
section 4958	٠. ٠								<b>F</b> \$ —			
3 Enter the amount of tax, If any	, on line	2, abo	ve, reimbursed by	y the d	organization .	•			<b>-</b> \$			
Part III Loans to and/or I	rom	Intere	sted Persons	 3.								
Complete if the organiz					Part IV, line 26	, or F	orm 990	-EZ, Parl	: V , line 38	а		
	(b)	oan to						(	f)			
(a) Name of interested person and		m the	(c)O riginal				<b>e)</b> In		oved	'-	)Writte	
purpose	1	zation?	principal amour	nt 🖟	<b>d)</b> Balance due	de	fault?		ard or	agi	reement	:7
	To	From	1			Yes No		Yes	committee?		es	No
	<del>  '</del>	1 10111		_		1 6	110	165	110	+:	-	110
				-								
Total			<u> ▶ :</u>	 \$			<u> </u>			+		
Part IIII Grants or Assistar				•	rsons.							
Complete if the orga						/, lın	e 27.					
(a) Name of interested pers	o n	(	<b>b)</b> Relationship be	tweer	n interested per	rson	(0)/	mount of	arant or tu	, n.a. a	facciet	226
(a) Name of Interested pers	OII		and the	orgai	nızatıon		(6)/	inount of	grant or ty	pe o	ı assısı	апсе
			_									
Part IV Business Transact							- 20- 1	00h 1	٠			
Complete if the orga	nizatio			Torn	1 990, Part IV	, iin	e 28a, 2	28D, OF 2	. 8C.		(-) (-)	
			) Relationship veen interested		(c) A mount of						(e) Sha	_
(a) Name of interested perso	า	1	erson and the		transaction		( <b>d)</b> Des	cription	of transact	ıon		iues?
		' (	organization								Yes	No
Edwin L Heim Company		Larry I	Bashore, Trustee		397,7	78	Frey Aca	idemic Bu	ıldıng Heat	ing		Νo
			ident of Edwin L				Replacer	nent				
		+	Company	-								<u> </u>
M&T Investment Banking Group		1	Eremita, trustee, n-controlling		106,6			Credit ar				Νo
			yee of M&T				Kemarke	ting rees				
		Invest	ment Bankıng									
		Group		$\bot$			_					<u> </u>
D Kelly Phipps		Spous Presid	e of Kım Phipps,		79,3	881	Employe	e Compei	nsation			Νo
Beverly Goodling			ent e of Barry	+	40.0	152	Employe	e Compei	neation			Νο
bevery Gooding			e of barry ng, Vice		49,0	, , , _	Linbioxe	e Compe	13 9 1 1 1 1 1			10
		Presid	ent for									
		Advan	cement	_								

DLN: 93493132035961

OMB No 1545-0047

Open to Public Inspection

## **SCHEDULE M** (Form 990)

Department of the Treasury

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

**NonCash Contributions** 

Internal Revenue Service Name of the organization MESSIAH COLLEGE

**Employer identification number** 

23-1352661

Pa	rt I Types of Property					
		(a) Check If applicable	<b>(b)</b> Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line	(d) Method of determining revenues	
1	Art—Works of art	X	36	-	Independent Appraisal	
2	Art—Historical treasures .			,		
3	Art—Fractional interests					
4	Books and publications	Х		2,500	Independent Appraisal	
5	Clothing and household					
	goods					
6	Cars and other vehicles					
7	Boats and planes					
8	Intellectual property					
9	Securities—Publicly traded .	Х	17	727,551	Fair Market Value	
10	· · · · · · · · · · · · · · · ·					
11	Securities—Partnership, LLC, or trust interests					
	Securities—Miscellaneous					
13	Qualified conservation contribution—Historic structures					
14	Q ualified conservation					
	contribution—Other					
15						
16	Real estate—Commercial					
17	Real estate—Other					
18	Collectibles	X	1		Independent Appraisal	
19	•	X	3		Actual Cost	
20	Drugs and medical supplies .	X	1	1,200	Expert Opinion	
	Taxidermy					
	Historical artifacts					
	Scientific specimens					
	Archeological artifacts			0.040		
25	Other ► ( Equipment )	X	4	9,810	Actual Cost	
26	Gameroom Other ► (Equipment )	x	1	1.300	Expert Opinion	
27	Other ► ( Software )	X	1		Expert Opinion	
28	Other►( )			,		
29	Number of Forms 8283 received	bv the ora	anızatıon durıng the tax ve	ar for contributions		
	for which the organization compl				29	
					Yes	No
30a	During the year, did the organiza	ition receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it	
	must hold for at least three year	s from the o	date of the initial contributi	on, and which is not require	d to be used	
	for exempt purposes for the enti	re holdıng p	eriod?		30a	No
ь	If "Yes," describe the arrangeme	ent in Part I	I			
31	Does the organization have a gif	tacceptand	e policy that requires the i	review of any non-standard	contributions? <b>31</b> Yes	
32a	Does the organization hire or use contributions?	e thırd partı • • •	es or related organizations	to solicit, process, or sell		No
33	If "Yes," describe in Part II If the organization did not report describe in Part II	revenues i	n column (c) for a type of p	roperty for which column (a	) is checked,	

#### Part II

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Ident if ier	Ret urn Reference	<b>Explanat ion</b>
SchM_P01_S00_L25	, ,	The college received a gift-in-kind during Fiscal Year 2008 of an emergency alert system The college amortizes the gift over a five-year period

Schedule M (Form 990) 2009

Software ID: **Software Version:** 

> **EIN:** 23-1352661 Name: MESSIAH COLLEGE

As Filed Data -

**SCHEDULE 0** (Form 990)

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Return

Reference

Bank

**Supplemental Information to Form 990** 

OMB No 1545-0047

DLN: 93493132035961

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ► Attach to Form 990. **Employer identification number** 

Name of the organization MESSIAH COLLEGE

**Identifier** 

**Explanation** F990\_P01\_S00\_L07a Form 990, Part I, Unrelated Business Revenue on Form 990 does not equal Unrelated Business Revenue on Form 990-

> receives a referral fee from the College's current benefits broker, the Radnor Group Todd Lehman, Trustee, is the owner of Interiors, Inc. which supplies furnitute, window coverings, and interior design

Communications, Camp Hill, PA The company provides communications services to the College Andrew Samuel, Trustee, is the CEO of Graystone Tower Bank The Bank leases space from Messiah College for a branch Additionally, the College has Certificates of Deposit and other investments held by Graystone

services to the College Mary Anne Morefield, Trustee, is a member of the board for Morefield

23-1352661

	Line 7a	T because Cost of Goods sold is included with Functional Expenses on Form 990 whereas Cost of Goods Sold is included as an offset to Unrelated Business Revenue
ldentifier	Return Reference	Explanation
F990_P06_S0A_L02	Form 990, Part VI, Section A, Line 2	Two employees of the college are related to two officers through marriage. Kelly Phipps, husband of President Kim Phipps, received compensation for legal and advisory assistance to the College Board of Trustees and the Messiah College Office of Development. Kelly is also an adjunct instructor in the School of Management and Business. Beverly Goodling, wife of Barry Goodling, Vice President for Advancement, received compensation for services to the college as director of the Early Learning Center as well as for part-time teaching. All transactions were at fair market value. Amounts paid were consistent with levels of compensation that would have been paid to other parties had they rendered these services to the College. Additionally, Todd Lehman, Trustee, is the Nephew of Eunice. F. Steinbrecher, Chair. Larry Bashore, Trustee, is president of the E.L. Heim Company, which provides electrical and mechanical construction and maintenance services to the College. Linda Eremita, Trustee, is an employee at M&T Bank, the college's primary banking relationship. Linda is not a controlling officer of M&T Bank nor M&T Securities. She is the Managing Director of Education Investment Banking of the AICUP Financing Program and the College has used M&T Securities to market its variable rate bonds in 2010. The college does also utilize a M&T Bank, which is separate from M&T Securities, as its primary checking account, paying fees of \$49,026. Linden Hustedt, Trustee, is a stockholder of Bala Financial Group. Bala

ldentifier	Return Reference	Explanation
F990_P06_S0B_L11	Form 990, Part VI, Section B, Line 11	Revenues and expenses are reconciled back to financial statements through various worksheets After being prepared by an internal accountant, the Form 990, 990T and all related schedules and attachments are given to the Vice President for Finance and the Controller for review Finally, the forms are reviewed by Audit Committee of the Board of Trustees, the chair of which is a Certified Public Accountant

ldentifier	Return Reference	Explanation
F990_P06_S0B_L12c	Form 990, Part VI, Section B, Line 12c	Each trustee and officer of Messiah College shall complete a Disclosure Statement in a form authorized by the Board of Trustees and file the same with the Secretary of the Board of Trustees prior to July 1 of each fiscal year. All of the responses will remain confidential. However, to allow the College to be proactive in addressing potential or real conflicts, and to fulfill auditing and federal reporting requirements, the Secretary forwards copies to the Chairperson, the Audit Committee, and the Vice President for Finance

Identifier	Return Reference	Explanation
F990_P06_S0B_	L13 Form 990, Part VI, Section B, Line 13	As of the end of the fiscal year, the Whistleblow er policy was in final draft form, but was not officially approved by the governance council until its first meeting of the next fiscal year which occurred on September 9, 2010

ldentifier	Return Reference	Explanation
F990_P06_S0B_L14	, , , , , , , , , , , , , , , , , , ,	The document retention and destruction policy was still being finalized at the end of the tax year. It was approved on April 21, 2011

ldentifier	Return Reference	Explanation
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	First, the College reviews and participates in compensation surveys, including surveys for executive leadership compensation. Comparative data is then used to establish an appropriate baseline. Based on that comparative median, a range between 80-120% of the median is established. The Compensation Committee of the Board of Trustees reviews the President's performance and compensation data. The committee recommends a compensation package to the Board of Trustees for approval. In the case of determining compensation packages for Vice Presidents, the Compensation Committee both reviews and approves the compensation packages based on the survey data and ranges.

ldentifier	Return Reference	Explanation
F990_P06_S0C_L19		The college posts its financial statements on the college's public wiebsite under the Business Office section. The governing documents and conflict of interest policy are available on the college's public wiebsite under the President's Office section.

ldentifier	Return Reference	Explanation
SchK_P01_S00_L00f	Schedule K, Part I, Column f	Line A - PHEFA Revenue Bonds, Series 2003 AA3 Proceeds from the Issue were used to finance the costs of (i) refunding a portion of the Pennsylvania Higher Education Facilities Authority 2001 I4 Revenue Bonds, proceeds used for (1) construction and equipping of an academic building, a student union, and an addition to an administration building, (2) renovation to classroom buildings and campus center, (3) expansion of student housing and dining facilities, (4) upgrades to campus utilities and parking, (5) infrastructure improvements, and (6) certain miscellaneous capital expenditures, (ii) refunding the Authority's Series 1998 C2 Revenue Bonds, the proceeds of which were used for renovations and improvements to Kline Hall Science Building and construction and equipping the attached Jordan Science Center, (iii) certain miscellaneous capital expenditures including without limitation, construction, improvements and equipping of campus facilities, and (iv) the payment of certain costs of issuing and insuring the Bonds and the funding of debt service reserve. Line B - PHEFA Revenue Bonds, Series 2005 DD1 Proceeds of the issue were used to finance the costs of (i) the advance refunding of a portion of the Cumberland County Municipal Authority's College Revenue Bonds, Series 1995, (ii) certain miscellaneous capital expenditures including without limitation, construction, improvements and equipping of campus facilities, and (iii) payment of certain costs of issuing and insuring the Bonds. Line B - PHEFA Revenue Bonds, Series 2005 DD1. Proceeds of the Issue were used to finance the costs of, (i) the advance refunding of a portion of the Cumberland County Municipal Authority's College Revenue Bonds, Series 1995, (ii) certain miscellaneous capital expenditures including without limitation, construction, improvements and equipping of campus facilities, and (iii) payment of certain costs of issuing and insuring the Bonds.

ldentifier	Return Reference	Explanation
SchK_P02_S00_L05	Part II, Line 5	Column A, PHEFA Revenue Bonds, Series 2003 AA3 Total issuance costs of \$575,071 are comprised of a bond insurance premium of \$369,862 and actual issuance costs of \$205,209 Column B, PHEFA Revenue Bonds, Series 2005 DD1 Total issuance costs of \$861,926 are comprised of a bond insurance premium of \$531,931 and actual issuance costs of \$329,995

Software ID: Software Version:

**EIN:** 23-1352661

Name: MESSIAH COLLEGE

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors									
(B) Average hours		tion (	che	)		ı	( <b>D)</b> Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
2	х						0	0	0
2	Х						0	0	0
2	Х						0	0	0
2	Х						0	0	0
2	х						0	0	0
2	Х						0	0	0
2	х						0	0	0
2	х						0	0	0
2	Х						0	0	0
2	Х						0	0	0
2	Х						0	0	0
2	Х						0	0	0
2	Х						0	0	0
2	х						0	0	0
2	Х						0	0	0
2	Х						0	0	0
2	Х						0	0	0
2	Х						0	0	0
2	Х						0	0	0
2	Х						0	0	0
2	Х						0	0	0
2	х						0	0	0
2	Х						0	0	0
2	Х						0	0	0
2	х						0	0	0
	(B) A verage hours per week  2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	(B) A verage hours per week       Post or         Qradirector       Qradirector         2       X	(B) A verage hours per week         Position (a) what a language week           2 X         2 X           2 X	CB	(B) A verage hours per week         Position (check a that apply)           1 Individual trustee         Office           2 X         4           2 X         5           2 X         6           2 X         7           3 X         7           4	C	CC	Compensation   Comp	Compensation   Comp

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors										
<b>(A)</b> Name and Title	(B) A verage hours		(C tion ( hat a	che		I		(D) Reportable compensation from the organization (W- 2/1099-MISC)	<b>(E)</b> Reportable compensation	(F) Estimated amount of other compensation from the organization and related organizations
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		from related organizations (W- 2/1099- MISC)	
Mr Andrew S Samuel Trustee	2	Х						0	0	0
Mr Anthony J Schiano Trustee	2	Х						0	0	0
Mrs Kım R Smith Esq Trustee	2	х						0	0	0
Dr Jerry L Wenger Trustee	2	Х						0	0	0
Kım S Phipps President	40			х	х			268,974	0	51,565
Randall G Basınger Provost	40			х	х			149,485	0	24,357
Barry G Goodling Vice President for Advancement	40			х	х			136,902	0	41,237
Lois J Voigt Vice President for Finance	40			х	х			122,688	0	16,741
Kathrynne G Shafer Vice President for Operations	40			х	х			114,115	0	22,199
John Chopka Vice President for Enrollment Management	40			Х	х			113,286	0	31,321
William J Stowman Professor Of Music	40					×		114,160	0	22,598
Rhonda Jacobsen Professor of Psychology	35					х		105,587	0	13,659
Vincent A LaFrance Professor of Economics	35					х		105,420	0	20,033
Amanda A Coffey Director of Human Resources	40					х		103,659	0	20,878
William G Strausbaugh Assistant Provost / Dean of Curriculum	40					х		103,656	0	39,402

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

•					
	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
Fees and Contracts with Government Agencies	524,292	4,261	4,261	0	0
Membership Dues and Assessments	611,710	1,937,676	1,937,676	0	0
Tuition and Fees	611,310	74,572,079	74,572,079	0	0
Auxiliary Enterprises	453,000	19,305,076	19,285,094	19,982	0
Bookstore Sales from Inventory	451,211	1,688,814	0	0	1,688,814

# Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Tuition for External Programs	3,797,059	3,797,059	0	0
Utilities	3,547,610	3,545,470	1,771	369
Purchases for Resale	4,220,341	3,891,715	328,626	0
Equipment Service and Repair	1,005,910	883,451	107,332	15,127
Facility Service and Repair	479,037	504,147	-15,280	-9,830