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DLN: 93493207001022

Form **990** 匆

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)

OMB No 1545-0047

2010

	Revenue	e Service	► The organization may have	ve to use a copy of this return to satisfy	state reporting	requiremen	Inspection					
A Fo	r the 2		endar year, or tax year begin	ning 07-01-2010 and ending 06-30-20	11							
B Che	eck if a	pplicable	C Name of organization MESSIAH COLLEGE			D Employe	er identification number					
Add	lress ch	nange	Doing Business As			23-135	52661					
∏ Nar	ne cha	nge	boing business to			E Telepho	ne number					
	ıal retu			f mail is not delivered to street address)	Room/suite	(717)7	66-2511					
_	mınate		ONE COLLEGE AVE			C Cross ros						
M Am	ended i	return	City or town, state or country, ar GRANTHAM, PA 17027	nd ZIP + 4	_	G Gross red	ceipts \$ 123,215,351					
App	lication	n pending										
			F Name and address of p KIM S PHIPPS	rincipal officer	H(a) Is this a	group return for	affiliates? Yes Vo					
			ONE COLLEGE AVE		H(b) Are all	affiliates includ	ded?					
			BOX 3000 GRANTHAM,PA 17027				list (see instructions)					
	x-exem	npt status		¶ (insert no)	H(c) Grou	p exemptior	n number ►					
1 14/	obsita	· http	//www messiah edu	(4,(2,) 6, 7, 6, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	-							
					<u> </u>		1					
			Corporation Trust Associa	ition Other 🕨	L Year of for	mation 1909	M State of legal domicile PA					
Ра	rt I	Sumr		sion or most significant activities								
Activities & Governance	8	Messiah College is a Christian college of the liberal and applied arts and sciences. The College is committed evangelical spirit rooted in the Anabaptist, Pietist and Wesleyan traditions of the Christian Church. Our miss and women toward maturity of intellect, character and Christian faith in preparation for lives of service, leader reconciliation in church and society.										
উ	2 (Check thi	s box 🛏 if the organization	discontinued its operations or disposed	of more than 2!	5% of its ne	et assets					
*ర క్ర	ι ε	Number o	f voting members of the gove	erning body (Part VI, line 1a)		3	31					
ij.	4 1	Number o	fındependent votıng member	4	4 24							
Ę	5 7	Total num	nber of individuals employed	ın calendar year 2010 (Part V, line 2a)		_ :	3,109					
~	l		nber of volunteers (estimate i	• •		<u> </u>	5 255					
			elated business revenue from ated business taxable incom	Part VIII, column (C), line 12		7	a 109,475					
	יט	ivec uniten	ated business taxable income	e noni i onii 550 i , inie 54 i i		/	U U					
					Prior	r Year	Current Year					
	8	Contrib	utions and grants (Part VIII	, line 1 h)		10,700,05	Current Year 6 12,832,387					
——	8			, line 1h)			6 12,832,387					
levenue		Progran	n service revenue (Part VIII			10,700,05	6 12,832,387 6 101,244,838					
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May the IRS discuss this return with the preparer shown above? (see instructions)

Fırm's address 🕨

Use Only

Phone no 🕨

┌Yes ┌No

	(-	= /				. age =
ar	t III	Statement of Program S Check if Schedule O contains a				.୮
1	Briefl	y describe the organization's mi	sion			
piri	t rooted	llege is a Christian college of the din the Anabaptist, Pietist and Vintellect, character and Christian	esleyan traditions of the Chi	ristian Church Our mission is t	o educate men and wor	nen toward
2	the pr	ne organization undertake any sig rior Form 990 or 990-EZ?			ted on Yes I	lo
	If "Ye	s," describe these new services	on Schedule O			
3	servio	ne organization cease conducting ces?			ım ┌ Yes 	No
	If "Ye	s," describe these changes on S	chedule O			
4	Section	ribe the exempt purpose achieve on 501(c)(3) and 501(c)(4) orga itions to others, the total expens	nizations and section 4947 (a)(1) trusts are required to repo		s and
4a	(Code	e) (Expenses \$	101,955,882 including	grants of \$ 28,309,914) (F	Revenue \$ 103,03	8,761)
	appro educa progra	ah College provides private co-education oximately 2,900 students in a residential ation issues and has numerous partnershams in Harrisburg and Philadelphia and ation experiences in lesser developed co	setting Messiah College is a collegips with school districts and literary has strong student participation in fo	e of the liberal and applied arts and so outreach programs. The college is also	ciences that conducts resear o involved in community ser	ch on critical vice outreach
4b	(Code	e) (Expenses \$	ıncluding ç	grants of \$) (Re	evenue \$)
4c	(Code	e) (Expenses \$	ıncludıng <u>c</u>	grants of \$) (Re	evenue \$)
4d	Othe	er program services (Describe in	Schedule O)			
	(Exp	enses \$ 0	including grants of \$	0)(Revenue\$	0)
4e	Tota	I program service expenses►\$	101,955,882			

Part TV	Checklist o	f Required	Schedules
	CHECKHISLO	Reduired	Sciledules

			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 (see instruction)? 📆	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, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
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? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
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, Parts I and IV	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, Parts II and IV	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, Parts III and IV .	16	Yes	
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
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		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

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		No
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 lines 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		Νo
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
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		No
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)			
a	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	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect 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 Ma	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	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
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		No
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)?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $			
36	Section 501(c)(3) organizations. 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 990	(2010)

Form 990 (2010)												Page 5
Part V	Statements Regarding Other IRS Filings and Tax Complia	ance	e									
	Check if Schedule O contains a response to any question in this Part V										. [고	

	<u> </u>		Yes	No
.a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable		res	NO
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1a 196 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		V	
a	gaming (gambling) winnings to prize winners?	1c	Yes	
b	return			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
1	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N c
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	صح ا		-
-		5с		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
a	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	7a	Yes	
	services provided to the payor?		V	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	file Form 8282?	7c		N
	- · · · · · · · · · · · · · · · · · · ·			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		N
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
J	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		N
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
	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		
	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
D	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	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)			
a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
c	In which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand			
	13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
'n	If "Vac " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	1/1h		

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.

Check if Schedule O contains a response to any question in this Part VI	•	•		•	•		•		•	. ~	
---	---	---	--	---	---	--	---	--	---	------	--

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
ь	Enter the number of voting members included in line 1a, above, who are			
_	Independent 1 1 1 1 1 24			
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 supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Does the organization have members or stockholders?	6		Νo
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	٦.		NI -
	governing body?	7a		No
ь	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		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal			
	venue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νo
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		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?			
		11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	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	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
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?	460		
		16b		
<u>Se</u>	ection C. Disclosure 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 V 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 the organization 🕨

David S Walker One College Ave Box 3010 Grantham, PA 17027

(717) 766-2511

<u>Part VIII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

Check this box if neither the organ	nization nor any r	<u>elated o</u>	rgan	zatio	on c	ompen	sate	d any current office	er, director, or trust	ee
(A) Name and Title	(B) Average hours	(B) (C) Average Position (check all that apply)					(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation	
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
See Additional Data Table										

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

		1							<u> </u>				
	(A) Name and Title	(B) Average hours	1	tion that a	•		II 		(D) Reportable compensation	(E) Reportable compensation		(F) Estima mount o	ted fother
		per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	01	from t from t rganizati relate organiza	he on and ed
See A	dditional Data Table												
											$^{+}$		
											+		
											+		
											+		
											+		
1b	Sub-Total							<u> </u>			+		
	Total from continuation sheets	to Part VII, Sec					· ·	•			+		
d	Total (add lines 1b and 1c) .							 -	1,411,251	0		2	75,569
2	Total number of individuals (inc \$100,000 in reportable compen					ted	above) who	received more tha	n			
												Yes	No
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sca									ated employee	3		No
4	For any individual listed on line organization and related organiz	ations greater t	han \$15	0,00	0071	f "Y	es," co	mple	te Schedule I for suc		4	Yes	
5	Did any person listed on line 1a									r individual for	-	165	
	services rendered to the organiz										_	l 1	

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Highmark Blue Shield Inc 1800 Center Street Camp Hill, PA 17089	Medical Insurance for Employees	4,186,898
1853 William Penn Way	Construction of Calvin & Janet High Center for the Worshiping and Performing Arts Center Building	2,527,038
50 Alpha Drive	External Cultural Experience Programs	1,382,722
Edwin L Heim Company 1918 Greenwood Street Harrisburg, PA 171052247	Electrical and Construction Services	1,289,795
Greenfield Architects Ltd 1853 William Penn Way Lancaster, PA 17601	Design for High Center	758,030
2 Total number of independent contractors (including but not limited to those listed above) v	who received more than	

Part	ATT 1	Statement of Reven	<u>ue</u>		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	
इ इ	1a	Federated campaigns	1a	0				- 311
ran	ь	Membership dues	. 1b	0				
s, g amc	c	Fundraising events	1c	37,623				
gift: ar:		Related organizations		0				
18, imi		Government grants (contributions)		1,521,375				
ntiol er s	f	All other contributions, gifts, grants	s, and 1f	11,273,389			 	
ē. Ş€	_	similar amounts not included above Noncash contributions included in li	e ===					
Contributions, gifts, grants and other similar amounts			_		12,022,207			
ပ်က	h	Total. Add lines 1a-1f	<u> </u>		12,832,387			<u> </u>
e e	2-		ant Assume	Business Code				.
Program Service Revenue	2a b		-	524292 611710	95,138	95,138 1,833,450		
-	C	·		011710			0	
ИСе	d	Tuition and Fees		611310	78,090,231		105 503	
Ser	u	Auxiliary Enterprises		453000	21,226,019	0		21,120,427
an	е							
ıßo,	f	All other program service re-	venue		0	0	0	(
Ţ.	g	Total. Add lines 2a-2f			101,244,838			
	3	Investment income (includin	ng dividends, interest					
		and other similar amounts)			4,949,937	, ,		
	4	Income from investment of tax-ex		_	0	_	, ,	
	5	Royalties		(1) D = 11 = 1	506	506	0	'
	6a	Gross Rents	(ı) Real 465,760	(II) Personal				
		Less rental	0	0				
		expenses Rental income	465,760					
		or (loss)			465.760			465.76
	d	Net rental income or (loss)		(v.) O.H v.	465,760	0	0	465,76
	7a	Gross amount	(ı) Securities 0	(II) O ther 3,438,111				
	,	from sales of assets other than inventory						
	b	Less cost or other basis and	1,032,045	0				
		sales expenses	1 022 045	2.420.111				
		Gain or (loss)	-1,032,045	3,438,111	2 406 066	2,406,066	0] ,
		Net gain or (loss) Gross income from fundraising			2,400,000	2,400,000		
Other Revenue		(not including \$ of contributions reported on	line 1c)					
Č		See Part IV, line 18	а	20.405				
hei	ь	Less direct expenses .	-	29,182				
ŏ		Net income or (loss) from fui		0	29,182		0	29,18
	9a	Gross income from gaming a	ictivities See Part IV, line 19 .	a				
	b	Less direct expenses .		b				
	C	Net income or (loss) from ga	ming activities					
	10 a	Gross sales of inventory, les returns and allowances	S					
		returns and anowances .	a					
	ь	Less cost of goods sold .	. b					
	C	Net income or (loss) from sa	les of inventory 🟲					
		Miscellaneous Revenue		Business Code				
	11a	Miscellaneous Revenue		900099	175,158			
	Ь	Management and Consulting	Fees	541610	38,223	38,223	0	
	_	Seamed Disservets		424000	41,249	0	0	41,24
		Earned Discounts All other revenue		12.1330	0			,
		Total. Add lines 11a-11d					 	
		Otan Add IIIICS II a - II d			254,630			
				L				
	12	Total revenue. See Instructi	ons		122,183,306		109,475	

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Par	t IX Statement of Functional Expenses				
Δ	Section $501(c)(3)$ and $501(c)(4)$ organizations must li other organizations must complete column (A) but are not required to c			(D)	
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0	enpensee	general expenses	
2	Grants and other assistance to individuals in the U S See Part IV, line 22	27,159,712	27,159,712		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	1,143,342	1,143,342		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,023,498	192,520	670,590	160,388
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	34,117,851	29,611,765	3,563,701	942,385
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,191,768	1,849,816	274,226	67,726
9	Other employee benefits	8,029,289	7,184,249	675,196	169,844
10	Payroll taxes	2,551,713	2,180,986	 	77,239
а	Fees for services (non-employees) Management	1,792,168	1,047,072		45,672
ь	Legal	65,756		65,506	250
c	Accounting	62,654		62,654	
d	Lobbying			52,551	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	291,920	291,765		155
g	Other	368,206	359,169	†	1,246
12	Advertising and promotion	608,499	360,694		54,218
13	Office expenses	1,386,302	1,137,411	†	40,216
14	Information technology	546,923	427,708	· · · · · · · · · · · · · · · · · · ·	16,922
15	Royalties	10,445	10,445	' 	10,322
16	Occupancy	246,047	200,318	 	37,594
17	Travel	2,813,470	2,491,206		67,106
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	2,013,470	2,431,200	233,130	07,100
19	Conferences, conventions, and meetings	363,825	289,416	51,544	22,865
20	Interest	1,877,097	1,757,557	· · ·	
21	Payments to affiliates	· ·	, ,		
22	Depreciation, depletion, and amortization	9,200,672	8,913,113	287,559	
23	Insurance	595,234	65,088	†	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)	,	,		
а	Tuition for External Programs	3,458,871	3,458,871	0	0
b	Utilities	4,179,014	4,172,087	6,927	0
c	Purchases for Resale	4,260,046	3,867,909	392,137	0
d	Equipment Services and Repair	1,199,971	1,074,008	108,821	17,142
e	Facility Service and Repair	888,076	888,076	0	0
f	All other expenses	2,323,752	1,821,579	409,274	92,899
25	Total functional expenses. Add lines 1 through 24f	112,756,121	101,955,882	8,986,372	1,813,867
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the	•			· · ·
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				000 (2010)

Pa	rt X	Balance Sheet					<u> </u>
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			0	1	0
	2	Savings and temporary cash investments			20,715,036	2	26,114,057
	3	Pledges and grants receivable, net			6,920,050		5,572,398
	4	Accounts receivable, net			1,780,324	4	1,444,853
	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of	s, key	employees, and	, ,		<u> </u>
		Schedule L			0	5	0
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$, and contributing esponsoring organizations of section $501(c)(9)$ voluntary emploorganizations (see instructions)	mploy	ers, and			
\$		Schedule L			0	6	0
ssets	7	Notes and loans receivable, net			3,017,144	7	2,819,419
⋖	8	Inventories for sale or use			929,814	8	883,596
	9	Prepaid expenses and deferred charges			1,092,933	9	1,209,652
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	230,686,928			
	b	Less accumulated depreciation	10b	121,368,386	108,405,224	10c	109,318,542
	11	Investments—publicly traded securities			126,945,433	11	143,937,671
	12	Investments—other securities See Part IV, line 11			0	12	0
	13	Investments—program-related See Part IV, line 11			0	13	0
	14	Intangible assets			0	14	0
	15	Other assets See Part IV, line 11			14,020,454	15	15,411,551
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			283,826,412	16	306,711,739
	17	Accounts payable and accrued expenses .			6,391,789	17	5,074,309
	18	Grants payable			0	18	0
	19	Deferred revenue			390,426	19	338,800
	20	Tax-exempt bond liabilities			54,533,381	20	50,411,212
eS	21	Escrow or custodial account liability Complete Part IV of Schedu	le D		0	21	
bilities	22	Payables to current and former officers, directors, trustees, kee employees, highest compensated employees, and disqualified					
Ē		persons Complete Part II of Schedule L			0	22	
	23	Secured mortgages and notes payable to unrelated third partie	s .		0	23	
	24	Unsecured notes and loans payable to unrelated third parties			0	24	
	25	Other liabilities Complete Part X of Schedule D			18,006,445	25	16,941,601
	26	Total liabilities. Add lines 17 through 25			79,322,041	26	72,765,922
- N		Organizations that follow SFAS 117, check here ▶ 🔽 and com	plete	ines 27			
<u>9</u>		through 29, and lines 33 and 34.					i.
<u>8</u>	27	Unrestricted net assets			165,104,088	27	186,250,207
8	28	Temporarily restricted net assets		16,956,024	28	22,813,678	
ם	29	Permanently restricted net assets		22,444,259	29	24,881,932	
Fund Balances		Organizations that do not follow SFAS 117, check here ► a	nd cor	nplete			
ŏ		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30		
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31		
	32	Retained earnings, endowment, accumulated income, or other f	unds			32	
ĕ	33	Total net assets or fund balances			204,504,371	33	233,945,817
_	34	Total liabilities and net assets/fund balances			283,826,412	34	306,711,739

140	Check if Schedule O contains a response to any question in this Part XI	•		. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		122,1	183,306
2	Total expenses (must equal Part IX, column (A), line 25)	2			, ,56,121
3	Revenue less expenses Subtract line 2 from line 1	3		9,4	127,18
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		204,5	504,371
5	Other changes in net assets or fund balances (explain in Schedule O)	5		20,0	14,261
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		233,9	945,817
Pai	TEXII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
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 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 i Schedule O		2 c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were in on a separate basis, consolidated basis, or both	ssued			
	▼ Separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	За	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493207001022

OMB No 1545-0047

Employer identification number

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

h

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

MESSIAH COLLEGE Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of 11 one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type I **b** Type II Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the US?		(vii) A mount of support
		inst ruct ions))	Yes	No	Yes	No	Yes	No	
Total									

Provide the following information about the supported organization(s)

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

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

S	ection A. Public Support		and to quanty t							
	endar year (or fiscal year beginning									
Care	in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received (Do not									
	ınclude any "unusual									
	grants ")									
2	Tax revenues levied for the									
	organization's benefit and either									
	paid to or expended on its									
_	behalf									
3	The value of services or facilities									
	furnished by a governmental unit to									
_	the organization without charge									
4	Total. Add lines 1 through 3									
5	The portion of total contributions									
	by each person (other than a									
	governmental unit or publicly									
	supported organization) included on line 1 that exceeds 2% of the									
	amount shown on line 11, column									
	(f)									
6	Public Support. Subtract line 5 from									
Ū	line 4									
S	ection B. Total Support		<u> </u>	I I.						
	endar year (or fiscal year beginning									
	ın) >	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total			
7	A mounts from line 4									
8	Gross income from interest,									
Ū	dividends, payments received on									
	securities loans, rents, royalties									
	and income from similar									
	sources									
9	Net income from unrelated									
	business activities, whether or									
	not the business is regularly									
	carried on									
10	Other income Do not include gain									
	or loss from the sale of capital									
	assets (Explain in Part IV)									
11	Total support (Add lines 7									
	through 10)					<u> </u>				
12	Gross receipts from related activiti	es, etc (See inst	ructions)			12				
13	First Five Years If the Form 990 is t	for the organizati	on's first, second	, thırd, fourth, or	fifth tax year as a	501(c)(3) organı				
	check this box and stop here						►			
	-tiC Ct-tiC DI	L'a Carana at B								
<u> </u>	ection C. Computation of Pub Public Support Percentage for 2010			11 column (f))						
	· ·		•	II Column (1))		14				
15	Public Support Percentage for 2009	Schedule A, Pa	rt II, line 14			15				
16a	33 1/3% support test—2010. If the				line 14 is 33 1/3%	or more, check				
_	and stop here. The organization qua						▶ □			
b	b 33 1/3% support test—2009. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this									
	box and stop here. The organization				45.46		►			
1/a	a 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain									
							rt a d			
	in Part IV how the organization mee	ts the "racts and	circumstances"	test ine organiz	ration qualifies as	a publicly suppo				
L	organization	_2000 If+ba a	anization did not	chack a hay an l	no 12 165 166 -	r 17a and line	► □			
D	15 is 10% or more and if the organ									
	15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly									
	supported organization	aon meets the 10	acts and circuilis	tances test file	z organizacion qual	mes as a publici	y ▶[¯			
18	Private Foundation If the organizati	on did not check	a box on line 13	. 16a. 16b. 17a o	r 17b, check this	box and see	- 1			
	instructions	on ala not check	a box on fine 15	, 100, 100, 1700	I by check tills	SON GING SCC	▶ □			

organization

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total in) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f)) 15 16 Public support percentage from 2009 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f)) 17 **17** Investment income percentage from 2009 Schedule A, Part III, line 17 18 18 19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported

33 1/3% support tests-2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **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 explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Schedule A (Form 990 or 990-EZ) 2010

Software ID: 10000077
Software Version: v1.00

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		tıon (che	['])			(D) 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	×						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	
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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 rector 2 X <t< td=""><td>(B) Average hours per week Position (a) with at a large week 2 X Individual trustee 2 X X 2 X<</td><td> CB Position (cherthat apply per week Position (the that appl</td><td>(B) A verage hours per week Position (check a that apply) Officer week Individual trustee 2 X 2<!--</td--><td> C</td><td> CD</td><td> CD</td><td> Company Comp</td></td></t<>	(B) Average hours per week Position (a) with at a large week 2 X Individual trustee 2 X X 2 X<	CB Position (cherthat apply per week Position (the that appl	(B) A verage hours per week Position (check a that apply) Officer week Individual trustee 2 X 2 </td <td> C</td> <td> CD</td> <td> CD</td> <td> Company Comp</td>	C	CD	CD	Company Comp	

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

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours		tion (that a	(che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	per week	Individual trustee or director	Institutional Trustee	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	
Andrew S Samuel Trustee	2	Х						0	0	0	
Anthony J Schiano Trustee	2	Х						0	0	0	
Eunice F Steinbrecher Trustee	2	Х						0	0	0	
Dr Jerry L Wenger Trustee	2	Х						0	0	0	
Eric F Zee Trustee	2	Х						0	0	0	
John Chopka Vice President for Enrollment Management	40	Х						116,997	0	32,990	
Dr Randall G Basınger Provost	40	Х						154,958	0	25,001	
Dr Kım S Phipps President	40			х				198,757	0	44,924	
Dr Lois J Voigt Vice President For Finance	40			х				127,004	0	17,574	
Barry G Goodling Vice President for Advancement	40			х				141,453	0	22,022	
Kathrynne G Shafer Vice President for Operations	40			х				119,020	0	22,797	
Dr William G Strausbaugh Assistant Provost and Dean of Curriculum	40					х		113,844	0	42,343	
Dr Rhonda Jacobsen Dır Faculty Development and Prof Psychology	35					х		113,139	0	14,472	
Richard A Dent Chief Information Officer	40					Х		109,926	0	15,136	
Dr Susan K Hasseler Dean, School of Ed & Soc Scı, Comm Engagement	40					х		109,363	0	19,765	
Amanda A Coffey Director of Human Resources	40					х		106,790	0	18,545	

DLN: 93493207001022

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

	<u>'</u>	orm 990. F See separate instructions.	F	Inspection
	e of the organization BIAH COLLEGE		-	oyer identification number
Dor	t I Organizations Maintaining Donor A	duised Eunds or Other Similar E		352661
Par	organizations maintaining bonor A organization answered "Yes" to Form 99		unas c	or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
L	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (durıng year)			
1	Aggregate value at end of year			
5	Did the organization inform all donors and donor adv funds are the organization's property, subject to the		ior advis	red Yes No
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ber conferring impermissible private benefit			
Par	Conservation Easements. Complete	if the organization answered "Yes" t	o Form	990, Part IV, line 7.
2	Purpose(s) of conservation easements held by the o Preservation of land for public use (e g , recreat Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual easement on the last day of the tax year	ion or pleasure) Preservation of an Preservation of a G	certified	cally importantly land area historic structure
				Held at the End of the Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements	5	2b	
C	Number of conservation easements on a certified his	storic structure included in (a)	2c	
d	Number of conservation easements included in (c) a	cquired after 8/17/06	2d	
3	Number of conservation easements modified, transfe the taxable year •	erred, released, extinguished, or terminate	ed by the	e organization during
1	Number of states where property subject to conserv	ation easement is located ►		
5	Does the organization have a written policy regardin enforcement of the conservation easements it holds		dling of	violations, and Yes No
5	Staff and volunteer hours devoted to monitoring, ins			
	Amount of expenses incurred in monitoring, inspecti			the year 🟲 \$
3	Does each conservation easement reported on line $2170(h)(4)(B)(I)$ and $170(h)(4)(B)(II)$?	2(d) above satisfy the requirements of sec	tion	☐ Yes ☐ No
•	In Part XIV, describe how the organization reports c balance sheet, and include, if applicable, the text of the organization's accounting for conservation easer	the footnote to the organization's financial		
art	Organizations Maintaining Collection Complete if the organization answered		or Oth	er Similar Assets.
La	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fir	l for public exhibition, education or resear	ch in fur	
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research i		•
	(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, hist following amounts required to be reported under SFA		or financ	
	Revenues included in Form 990, Part VIII, line 1			▶ \$0

b Assets included in Form 990, Part X

Par	Organizations Maintaining Co	llections of Art,	His	torical Tr	eas	ures, or Oth	er Similar	Ass	ets (co	ontinued)
3	Using the organization's accession and other items (check all that apply)	records, check any	of th	ne following t	hat a	re a significant	use of its coll	ectio	n	
а	Public exhibition		d	Loan	orex	change program	S			
b	☐ Scholarly research		e	┌ Other	-					
c	Preservation for future generations									
4	Provide a description of the organization's co Part XIV	llections and explai	n hov	v they furthe	rthe	organızatıon's e	exempt purpos	se in		
5	During the year, did the organization solicit o						mılar	_		_
	assets to be sold to raise funds rather than t	·					V	,	Yes	✓ No
261	t IV Escrow and Custodial Arrange Part IV, line 9, or reported an am					n answered	res to Form	11 99	υ,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					or other assets	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	and complete the f	ollow	ing table			_			
								Amo	unt	
с	Beginning balance					1c				
d	Additions during the year					1d	1			
e	Distributions during the year					1e				
f	Ending balance					1f				_
2a	Did the organization include an amount on Fo		21?					Г	Yes	┌ No
	If "Yes," explain the arrangement in Part XIV				-11 1 -	F 000 D-	TV 4			
Рa	rt V Endowment Funds. Complete i	_				· 1	rt IV, line 1 (d)Three Year	· _		
		(a)Current Year	(b	Prior Year	<u> </u>	Two Years Back	Back	(e)Four \	'ears Back
1a	Beginning of year balance	111,630,497		96,965,68		123,997,663				
b	Contributions	1,310,413		11,013,364		2,144,190				
С	Investment earnings or losses	19,876,439		9,784,830	+	-22,726,172		_		
d	Grants or scholarships	1,028,678		937,884	-	782,528				
e	Other expenditures for facilities and programs	5,353,298		5,195,500		5,667,472				
f	Administrative expenses	0			7	0 00 00 00 00 1		_		
g	End of year balance	126,435,373		111,630,49	<u> </u>	96,965,681				
2	Provide the estimated percentage of the year		S							
а	Board designated or quasi-endowment 🕨	80 %								
b	Permanent endowment ► 20 %									
C	Term endowment ► 0 %									
3a	Are there endowment funds not in the posses organization by	ssion of the organiza	tion	that are held	and	administered fo	r the		Yes	No
	(i) unrelated organizations						Г	3a(i)	163	No
	(ii) related organizations						<u> </u>	Ba(ii)		No
b	If "Yes" to 3a(II), are the related organization	ns listed as required	on S	chedule R?			[3b		
4	Describe in Part XIV the intended uses of the									
Par	t VI Investments—Land, Buildings	s, and Equipmer	ıt. S	ee Form 9	90, F	Part X, line 10	<u>.</u>			
	Description of investment			(a) Cost or o basis (investr		(b)Cost or other basis (other)	(c) Accumula depreciatio		(d) Bo	ok value
1a	Land				0	2,167,31	l l			2,167,311
	Buildings		•		0	147,773,74:	66,564	701	8	1,209,040
	Leasehold improvements		•		0	13,513,260		$\overline{}$		5,855,429
	Equipment		•		0	61,095,146		$\overline{}$	1	3,949,292
	Other	rm 000 Part V colum	n (D)		0	0,20.7		0	4.0	6,137,470
ıvta	. Aud illes Ta-Te (Columni (a) Snoula equal Fo	ını 330, Pait X, COIUM	II (B)	, IIII e 10(C).)	•	<u> </u>	Schedul			9,318,542

Part VII Investments—Other Securities. See (a) Description of security or category		d of valuation
(including name of security)	(b)Book value	year market value
(1)Financial derivatives (2)Closely-held equity interests		
Other		
7	-	
Part VIII Investments—Program Related. Se		d of valuation
(a) Description of investment type	(b) Book value	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, II		
(1) Assets Held in Trust	ption	(b) Book value
(2) Beneficial Interest in Perpetual Trusts		10,058,909 3,800,670
(3) Deposits with Trustee under Debt Agreements		1,231,657
(4) Interest Receivable		320,315
Total. (Column (b) should equal Form 990, Part X, col.(B) line		 15,411,551
Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes Annuities Payable	8,836,289	
US Government Grants Refundable	2,370,124	
Funds Held in Trust for Others	2,020,652	
Student Deposits	1,312,188	
Funds Held in Custody for Others	137,684	
Other Liabilities	2,264,664	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	16,941,601	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	122,183,306
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	112,756,121
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	9,427,185
4	Net unrealized gains (losses) on investments	4	19,524,623
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	489,638
9	Total adjustments (net) Add lines 4 - 8	9	20,014,261
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	29,441,446
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	113,321,113
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		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	-8,295,653
3	Subtract line 2e from line 1	3	121,616,766
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 0		
b	Other (Describe in Part XIV)		
_ C	Add lines 4a and 4b	4c	566,540
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	122,183,306
1	Reconciliation of Expenses per Audited Financial Statements With Expenses Total expenses and losses per audited financial	s per	83,879,667
_	statements	1	83,879,007
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	-566,540
3	Subtract line 2e from line 1	3	84,446,207
4	Amounts 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)	1	
C	Add lines 4a and 4b	4c	28,309,914
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	112,756,121

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

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 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

Identifier	Return 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 use 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 or 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 creatively. Selected artwork is publicly displayed in the Gallery and rotated several times per year. The Oakes Museum of Natural History 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_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	Financial Aid shown as expense on 990 is recorded as contra- revenue in financial statements. Change in value of Split Interest Agreements on F/S but not on 990
SchD_P12_S00_L04b	Schedule D, Part XII, Line 4b	A mounts shown as revenue on 990 shown as contra-expenses on F/S
SchD_P13_S00_L02d	Schedule D, Part XIII, Line 2d	A mounts shown as contra-exp on Financial Statements shown as revenue on 990
SchD_P13_S00_L04b	Schedule D, Part XIII, Line 4b	Scholarships shown as expenses on 990 reported as contra- revenue on Financial Statements

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As Filed Data -

DLN: 93493207001022

OMB No 1545-0047

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.

Employer identification number

	23-1352661			
Pa	rt I		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?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during 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 If you need more space use Part II	3	Yes	
4	Does the organization maintain the following?			
а	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 basis?	4b	Yes	
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing 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 Part II			
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?			No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		No
е	Educational policies?	5e		No
f	Use of facilities?	5f		Νo
g	Athletic programs?	5g		No
h	O ther extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II	5h		No
	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		Νo
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II 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 C B 587, covering racial nondiscrimination? If "No," explain on Part II	7	Yes	

Part II Supplemental Information

Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions)

ldentifier	Return Reference	Explanation
SchE_P01_S00_L03	Schedule E, Part I, Line 3	The required disclosure is published in the Harrisburg Patriot-News annually by the office of Admissions
SchE_P01_S00_L06	Schedule E, Part I, Line 6	Messiah College does receive various government agency grants. Grants received during the year and listed on the annual A-133 audit are as follows. US Department of Education. Federal Supplemental Education Opportunity Grants (SEOG), Federal Work-Study Program, Federal Perkins Loan Program, Federal Pell Grants, Academic Competitiveness Grants, National Science and Mathematics Access to Retain Talent (SMART) Grants, Teacher Education Assistance for College and Higher Education Grants. US Department of Justice. Developing, Testing, and Demonstrating Promising New Programs, Juvenile. Mentoring Program. US Department of Energy. Renewable Energy. Research and Development.

Schedule E (Form 990 or 990-EZ) 2010

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.

DLN: 93493207001022 OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service

SCHEDULE F

Department of the Treasury

(Form 990)

	e of the organization					Employer identi	ification num	ber
ES	SIAH COLLEGE					23-1352661		
Pa	rt I General Informatio			he United States.	Complete	ıf the organıza	ation answe	ered
	"Yes" to Form 990, Pa							
L	For grantmakers. Does the assistance, the grantees' elic	-				-		
	the grants or assistance?		_			a useu to awa	✓ Yes	┌ No
	-						ŕ	,
2	For grantmakers. Describe in Pa United States	art V the organiz	zation's procedu	res for monitoring the us	se of grant f	runds outside th	e	
3	Activites per Region (Use Part	V ıf addıtıonal s	space is needed)				
	(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in	(e) If activit	y listed in (d) is a	(f) To	tal
		offices in the region	employees or agents in region or	region (by type) (e g , fundraising, program		ervice, describe fic type of	expenditu region/inve	
			independent contractors	services, investments, grants to recipients located in the		(s) in region	in reg	
				region)				
	Central America and the Caribbean	0	0	Program Services		p for students ın and learn		62,92
					about the	culture of		
	East Asia and the Pacific	0	0	Program Services	Costa Rica 3-week tri			90,92
					students t	o engage in		,
					and learn a	about the f New Zealand		
					and Thaila			
	Europe (including Iceland and Greenland)	0	0	Program Services	3-week tri	ps for o engage in		491,51
	Greemand				and learn a			
					cultures of			
					Albania, G Germany,			
					Netherland	ds		
					A dditional I nternation	nal Business		
					1	s a 10-week		
					summer pr	rogram for nal Business		
					majors and	d other		
					1	students to ughout Europe		
					and Asia t	o corporate		
					1	earn about a business		
					internation	-		
	Middle East and North Africa	0	0	Program Services		p for students		89,44
						ın and learn culture and		
					history of			
	Russia and the newly independent States	0	0	Program Services	The Intern	national Institute is a		305,57
					10-week s	ummer		
					program fo	or nal Business		
					majors and			
						students to ughout Europe		
						o corporate		
					sites and l	earn about		
					internation			
	Sub-Saharan Africa	0	0	Program Services	3-week tri			234,06
					and learn a	o engage in about the		
					cultures of	, ,		
	Sub-Saharan Africa	0	0	Program Services	Ghana and Cash Expe			9,008
	_ a _ a a a a a a a a a a a a a a a a a				Collaborat	ory in Africa		٠,٥٥٠
					The Collab			
					A frica to ii	nstall water		
						d the like to unserved or		
					underserv	ed areas		_
	Europe (including Iceland and Greenland)	0	0	Program Services	Cash Expe	enses for of students		83
	East Asia and the Pacific	0	0	Program Services	Cash Expe			5,05
					Recruiting			
					1			
			-		_	1		

3a Sub-total

to Part I

b Total from continuation sheets

Part	Part IV, l	ine 15, for any					plete if the organiza received more thai		
	(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 nur tax-exempt by	mber of recipie the IRS, or fo	nt organizations lis or which the grante	ted above that are e or counsel has pro	recognized as chari ovided a section 50	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . ►	
3	Enter total nur	mber of other o	organizations or en	tities					(Form 990) 2010

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 Part V if additional space is needed

Use Part V ıf ad	dditional space is nee	eded.		·	_		
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Institutional Financial Aid for Students attending Messiah College	Central America and the Caribbean	9	19,067			Financial aid applied directly against student receivable balance for the semester	Cash Value
Aıd for Students attending Messiah College	East Asia and the Pacific	26	·	Check Disbursement		Financial aid applied directly against student receivable balance for the semester	Cash Value
Aıd for Students attending Messiah College	Europe (including Iceland and Greenland)	2	4,440	Check		Financial aid applied directly against student receivable balance for the semester	Cash Value
Institutional Financial Aid for Students attending Messiah College	North America (including Canada and Mexico, but not the United States)	4	8,856	Check		Financial aid applied directly against student receivable balance for the semester	Cash Value
Institutional Financial Aid for Students attending Messiah College	Russia and the newly independent States	1	2,265	Check		Financial aid applied directly against student receivable balance for the semester	Cash Value
Institutional Financial Aid for Students attending Messiah College	South America	4	4,799	Check		Financial aid applied directly against student receivable balance for the semester	Cash Value
Institutional Financial Aid for Students attending Messiah College	South Asia	1	7,311	Check		Financial aid applied directly against student receivable balance for the semester	Cash Value
Institutional Financial Aid for Students attending Messiah College	Sub-Saharan Africa	8	38,837	Check		Financial aid applied directly against student receivable balance for the semester	Cash Value

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? <i>If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)</i>	<u> </u>	Yes	Г	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	দ	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	<u>\</u>	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	ᅜ	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	ᅜ	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	ত	No

Schedule F (Form 990) 2010

Schedule F (Form 990) 2010

Page **5**

Part V Supplemental Information
Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

ldentifier	Return Reference	Explanation
SchF_P01_S00_L02	Schedule F, Part I, Line 2	Student financial aid is substantiated based on information provided in the FAFSA Additionally, some aid is given based on High School GPA and SAT or ACT scores. Title IV funds are handled in accordance with applicable provisions. The Financial Aid program is audited in accordance with the Single Audit program as required.

Schedule F (Form 990) 2010

DLN: 93493207001022

OMB No 1545-0047

Open to Public

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

MESSIAH COLLEGE

Part I

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.

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

Internal Revenue Service Attach to Form 990 or Form 990-EZ. See separate instructions. Name of the organization

Inspection **Employer identification number**

23-1352661

a b c d	Indicate whether the organ Mail solicitations Internet and e-mail so Phone solicitations In-person solicitation Did the organization have	olicitations s a written or oral agre	ement wi	e f g th any inc	Solicitation of non Solicitation of god Special fundraisin	n-government grants vernment grants ng events ers, directors, trustees	
b	or key employees listed in If "Yes," list the ten higher to be compensated at leas	st paid individuals or	entities	(fundraise	ers) pursuant to agreem	ents under which the fur	Yes N ondraiser is ble
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai cust cont contrib	Did ser have ody or trol of outions?	(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			
Tota	al			>			
						•	•
3	List all states in which the licensing	organization is regis	stered or	licensed t	to solicit funds or has be	een notified it is exempt	from registration or

Pai	rt II	Fundraising Events. Com more than \$15,000 on Form				
			(a) Event #1 EPI Center Fundraising (event type)	(b) Event #2 Alumni Golf Outing (event type)	(c) Other Events 0 (total number)	(d) Total Events (Add col (a) through col (c))
₽	1	Gross receipts	7,283	30,340		37,623
Revenue	2	Less Charitable contributions		0		0
_	3	Gross income (line 1 minus line 2)	7,283	30,340		37,623
	4	Cash prizes	(0		0
ဟ	5	Non-cash prizes	(0		0
Expenses	6	Rent/facility costs	(0		0
	7	Food and beverages		3,330		3,330
Direct	8	Entertainment	(6,780		6,780
Δ	9	Other direct expenses .	3,152	1,375		4,527
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)		14,637
	11	Net income summary Combine li				22,986
Par	t III	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	1	Gross revenue				
s e	2	Cash prizes				
sesued	3	Non-cash prizes				
Dreat Ex	4	Rent/facility costs				
<u>_</u>	5	Other direct expenses				
	6	Volunteer labor	┌ Yes <u>%</u>	Г Yes <u>%</u> Г No	┌ Yes%	_
	7	Direct expense summary Add lines	s 2 through 5 ın column (d)		
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	ımn (d)	<u> ►</u>	
9 a b	Ist	er the state(s) in which the organization licensed to operate	gaming activities in eac	h of these states?		· Fyes FNo
10a b	Wer	re any of the organization's gaming Yes," Explain	licenses revoked, susper	nded or terminated during	the tax year?	· · Fyes FNo

11	Does the organization operate ga	aming activities with nonmembers? .		$\Gamma_{ m Yes}$ $\Gamma_{ m No}$
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mem	ber of a partnership or other entity	
	formed to administer charitable of	gaming?		. Г _{Yes} Г _{No}
13	Indicate the percentage of gamin	ng activity operated in		
а	The organization's facility		13a	
b	An outside facility		13b	
14	Provide the name and address of records	f the person who prepares the organiza	tion's gaming/special events books and	
	Name 🟲			
	Address 🟲			
15a	Does the organization have a co	ntract with a third party from whom the	organization receives gaming	
	-	· ·		. Γ_{Yes} Γ_{No}
b			tion 🟲 \$ and the	, , , , , , , , , , , , , , , , , , , ,
	amount of gaming revenue retain	ned by the third party 🟲 \$		
c	If "Yes," enter name and address	s		
	Name 🟲			
	Address ►			
16	Gaming manager information			
	Name 🟲			
	Gaming manager compensation I	> \$		
	Description of services provided			
	Director/officer	□ Employee	Independent contractor	
17	Mandatory distributions			
а		er state law to make charitable distribu		
				Tyes No
b		required under state law distributed t	o other exempt organizations or spent	
D		activities during the tax year \$	reconnect to question on Cohedule C./	
Pa	t IV Complete this part to proceed instructions.)	provide additional information for	responses to question on Schedule G (see
	Identifier	ReturnReference	Explanation	

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.

OMB No 1545-0047

DLN: 93493207001022

Department of the Treasury ► Attach to Form 990 **Inspection** 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 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be 1 (a) Name and address of **(b)** EIN (c) IRC Code (d) Amount of cash (f) Method of (a) Description of (h) Purpose of grant (e) A mount of nonorganization section grant valuation non-cash assistance or assistance cash or government ıf applicable (book, FMV, assistance appraisal, other)

Schedule I	(Form 990) 2010
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22
	Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance		
(1) Institutional Financial Aid to students attending Messiah College	2633		27,159,712	Book value	A pplied to student account receivable balance		

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

Identifier	Return Reference	Explanation
SchI_P01_S00_L02	, ,	Student financial aid is substantiated based on information provided in the FAFSA Additionally, some aid is given based on High School GPA and SAT or ACT scores Title IV funds are handled in accordance with applicable provisions. The Financial Aid program is audited in accordance with the Single Audit program as required.

DLN: 93493207001022

OMB No 1545-0047

Open to Public Inspection

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

Compensation Information

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

► Attach to Form 990. ► See separate instructions.

Name of the organization MESSIAH COLLEGE

Employer identification number

23-1352661

Pa	art I Questions Regarding Compensation	·				
				Yes	No	
1a	Check the appropriate box(es) if the organization provided any of 990, Part VII, Section A, line 1a Complete Part III to provide a					
	▼ First-class or charter travel ▼ Hou	using allowance or residence for personal use				
	☐ Travel for companions ☐ Pay	yments for business use of personal residence				
		alth or social club dues or initiation fees				
	☐ Discretionary spending account ☐ Per	rsonal services (e g , maid, chauffeur, chef)				
b	b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain					
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?					
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply					
		itten employment contract				
	·	mpensation survey or study				
	Form 990 of other organizations	proval by the board or compensation committee				
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization					
а	Receive a severance payment or change-of-control payment from the organization or a related organization?				No	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?					
c	Participate in, or receive payment from, an equity-based compe	nsation arrangement?	4c		Νo	
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III					
	Only 501(c)(3) and 501(c)(4) organizations only must complete	e lines 5-9.				
5	For persons listed in form 990, Part VII, Section A, line 1a, did compensation contingent on the revenues of	the organization pay or accrue any				
а	The organization?		5a		No	
b	Any related organization?		5b		No	
	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 to compensation contingent on the net earnings of	the organization pay or accrue any				
а	The organization?		6a		Νo	
b	Any related organization?		6b		Νo	
	If "Yes," to line 6a or 6b, describe in Part III					
7						
8	Were any amounts reported in Form 990, Part VII, paid or accur subject to the initial contract exception described in Regs secti					
	ın Part III		8		Νo	
9	If "Yes" to line 8, did the organization also follow the rebuttable section 53 4958-6(c)?	presumption procedure described in Regulations	9			

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is 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)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	f W-2 and/or 1099-MI	.SC compensation	(C) Retirement and other deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	incentive reportable		benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
(1) Dr Kım S Phipps	(I) (II)	198,757 0	0	0 0	20,000	24,924 0	243,681	293,786	
(2) Dr Randall G Basınger	(I) (II)	154,958 0	0	0	0			173,842	
(3) Barry G Goodling	(I) (II)	141,453 0	0	0 0	- 1	1	163,475	5 194,330 0	
(4) Dr William G Strausbaugh	(I) (II)	113,844 0	0	0 0	0 0	1		7 143,057 0	
(5)				,					
(6)	\top	1							
(7)	+	<u> </u>							
(8)	+	 		 	+			 	
(9)	+	 		<u> </u>	+			 	
(10)	+	 		<u> </u>	+			+	
(11)	+	 		<u> </u>	+			 	
(12)	+	 		<u> </u>	+			 	
(13)	+	 		<u> </u>	+				
(14)	+	 		<u> </u>	+				
(15)	+	 			+				
(16)	+	 			+				

Schedule J (Form 990) 2010

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

Identifier	Return Reference	Explanation
SchJ_P01_S00_L01a		The college did provide first class travel for the president to the Board meetings at the request of the Board of Trustees. The president of the college lives in an on-campus house for which a taxable housing allowance is determined. Finally, the college did pay for the president's country club dues.

Schedule J (Form 990) 2010

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2010

DLN: 93493207001022

Open to Public Inspection

Name of the organization MESSIAH COLLEGE

Department of the Treasury

Internal Revenue Service

Employer identification number

23-1352661

										23-1352661					
P	art I Bond Issues														
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue P	rice	(f)	Description	of Purpose	(g) De	feased	Beh	On alf of suer		Pool ncing
										Yes	No	Yes	No	Yes	No
A	PHEFA Revenue Bonds Series 2003 AA3	23-2243852	70917NYY4	10-23-2003	11,86	1,190	See P	art V			X		Х		х
В	PHEFA Revenue Bonds Series 2005 DD1	23-2243852	70917N3Y8	05-04-2005	31,08	2,980	See P	art V			Х		Х		х
_															
Pa	rt II Proceeds					Α		Ι .	В		С		1		
1	A mount of bonds retired				,	<u> </u>	0		0						
2	A mount of bonds legally defe	ased					0		0				+		
3	Total proceeds of issue					11 861	61,190 31,082,980								
4	Gross proceeds in reserve fu	ınds				1,186,119 0									
5	Capitalized interest from prod	ceeds				0 0									
6	Proceeds in refunding escrow	v				10,100,100 30,132,719									
7	Issuance costs from proceed	ds				575,071 861,926									
8	Credit enhancement from pro	ceeds					, 0		, 0						
9	Working capital expenditures	from proceeds					0		0						
10	Capital expenditures from pro	oceeds				0 88,336			6						
11	Other spent proceeds						0		0						
12	Other unspent proceeds						0		0						
13	Year of substantial completion	on			2.0	006		20	06				•		
					Yes	N	0	Yes	No	Yes		No	Yes		No
14	Were the bonds issued as pa	rt of a current refun	ding issue?			X	(Х						
15	Were the bonds issued as pa	rt of an advance ref	unding issue?		Х			Х							
16	Has the final allocation of pro	oceeds been made?			Х			Х							
17	Does the organization mainta allocation of proceeds?	aın adequate books	and records to sup	port the final	Х			Х							
Pa	rt IIII Private Business	Use				•								'	
						Α			В		С			D	
					Yes	N-	•	Yes	No	Yes		No	Yes		No

property financed by tax-exempt bonds?

financed property?

Was the organization a partner in a partnership, or a member of an LLC, which owned

Are there any lease arrangements that may result in private business use of bond-

Χ

Х

Χ

	,								9
Par	t IIII Private Business Use (Continued)								
		A		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		х		х				
b	Are there any research agreements that may result in private business use of bond- financed property?		×		x				
С	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 %				
	Has the organization adopted management practices and precedures to ensure the								

Has the organization adopted management practices and procedures to ensure the Χ post-issuance compliance of its tax-exempt bond liabilities? Part IV Arbitrage Α В С D Yes No Yes No Yes No Yes No Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and 1 Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue? Χ Χ Is the bond issue a variable rate issue? 2 Χ Χ За Has the organization or the governmental issuer entered into a hedge with respect to the bond issue? Χ Χ Name of provider Term of hedge Was the hedge superintegrated? Was a hedge terminated? Were gross proceeds invested in a GIC? 4a Χ Χ Name of provider b Term of GIC C Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Were any gross proceeds invested beyond an available temporary period? Χ Χ Did the bond issue qualify for an exception to rebate? Χ Χ

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Identifier	Return Reference	Explanation
	Part I, Column f	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 Series 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 the Kline Hall of 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 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

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DLN: 93493207001022

Schedule L

(Form 990 or 990-EZ)

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.

OMB No 1545-0047

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service

Name of the organization Employer identification number MESSIAH COLLEGE Part I **Excess Benefit Transactions** (section 501(c)(3) and section 501 (c)(4) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (c) (a) Name of disqualified person 1 (b) Description of transaction Corrected? Yes No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a (f) (b) Loan to (g)Written (e) In Approved or from the (a) Name of interested person and (c)Original default? by board or (d)Balance due agreement? organization? principal amount purpose committee? Τо From Yes No Yes No Yes No Part III Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (b) Relationship between interested person (a) Name of interested person (c) A mount of grant or type of assistance and the organization

Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

Complete if the organization	<u>n answered Yes on</u>	FORTH 990, Part IV, III	ie 28a, 28b, or 28c.		
(a) Name of Interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	organiz	aring of zation's nues?
	organization			Yes	No
(1) Edwin L Heim Company	Larry Bashore, Trustee is president of Edwin L Heim Company	•	Mechanical, Electrical and Construction Services		No
(2) David Kelly Phipps	Husband of President Kim Phipps		Compensation for legal services and teaching instruction for courses in the Business Department		No
(3) Beverly A Goodling	Wife of Barry G Goodling, Vice President for Advancement		Compensation for Director of Early Learning Center and Adjunct Instruction		No
					$oxed{\bot}$
					<u> </u>

Part V **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier | Return Reference | Explanation

Schedule L (Form 990 or 990-EZ) 2010

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DLN: 93493207001022

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

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

NonCash Contributions

Name of the organization MESSIAH COLLEGE

Employer identification number

23-1352661

Da	rt I Types of Property			L	23 1332001			
Pa	Types of Property	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d) Method of determining o		ontribut	ion
1	Art—Works of art	Х	1	1g 12 300	Independent Apprais	sal		
	Art—Historical treasures		<u> </u>	12,300	тисрепиене жрргин	<u> </u>		
_	Art—Fractional interests							
	Books and publications							
	Clothing and household							
3000	=							
6	Cars and other vehicles .							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded	Х	21	326,364	Fair Market Value			
10	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests .							
12	Securities—Miscellaneous							
	Qualified conservation contribution—Historic structures							
	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles	Х	1	15,000	Independent Apprais	sal		
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy	Х	1	7,522	Fair Market Value			
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts .							
25	O ther ▶ ()		See Add'l Data					
26	O ther ▶()							
27	O ther ▶()							
28	Other ► ()							
29	Number of Forms 8283 received by for which the organization complete				29			0
							Yes	No
30a	During the year, did the organization							
	must hold for at least three years fr			•	d to be used			
	for exempt purposes for the entire h	nolding p	eriod?			30a		No
b	If "Yes," describe the arrangement	ın Part I	I					
31	Does the organization have a gift a	cceptano	ce policy that requires the r	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or use the contributions?	nırd partı • • •	es or related organizations	to solicit, process, or sell i	non-cash	32a	Yes	
b	If "Yes," describe in Part II					w		
33	If the organization did not report re describe in Part II	venues ı	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.

Identifier	Return Reference	Explanation
SchM_P01_S00_L01		Although the college does not hold collections of art or historical treasures as an asset on our books, we do consider donations and give a tax-deductible receipt for the appraised value of the item. We consider this a "gift-in-kind" where the gift is booked as revenue with an offsetting expense as if we had purchased the item directly.
SchM_P01_S00_L32b	Schedule M, Part I, Line 32b	Stock gifts are liquidated through a third-party brokerage firm

Schedule M (Form 990) 2010

Additional Data

Software ID: 10000077

Software Version: v1.00

EIN: 23-1352661

Name: MESSIAH COLLEGE

Form 990 Schedule M, Part I - Types of Property

Property Type	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1q	(d) Method of determining oncash contribution amounts
Labor, Other ▶ (<u>Construction</u>)	Х	1	1,050	Fair Market Value
Equipment for Biodiesel Other ► (<u>Production</u>)	X	1	16,800	Fair Market Value
Flowers / Other ▶ (Plants)	Х	2	600	Fair Market Value
Other ► (Refrigerator)	Х	1	700	Fair Market Value
Emergency SMS Broadcasting				
Other ► (<u>System</u>)	X	1	2,450	Fair Market Value

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SCHEDULE O

As Filed Data -

DLN: 93493207001022

OMB No 1545-0047

2010

Department of the Treasury
Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization MESSIAH COLLEGE	Employer identification number
MESSIAN COLLEGE	
	23-1352661

ldentifier	Return Reference	Explanation
F990_P05_S00_L07g		We did not have any contributions of this type, and therefore, did not file any of the forms required for this contribution type

Identifier	Return Reference	Explanation
F990_P05_S00_L07h	Form 990, Part V, Line 7h	We did not have any contributions of this type, and therefore, did not file any of the forms required for this contribution type

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 by marriage D 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 Furthermore, Kelly is an adjunct instructor in the School of Business, Education and Social Sciences Beverly Goodling is the wife of Barry Goodling, Vice President for Advancement Beverly received compensation as Director of the Early Learning Center, a nursery and lab school within the college, as well as for part-time teaching. All transactions were at fair market value and amounts paid were consistent with levels of compensation that would have been paid to other parties had they rendered these services to the college, regardless of relation to any member of the College Additionally, Todd F Lehman, Trustee, is the nephew of Eunice F Steinbrecher, Trustee Larry Bashore, Trustee is the president of Edwin L. Heim Company, which occasionally provides electrical and mechanical construction and maintenance services to the college Linda Eremta, Trustee, is employed by M&T Bank M&T Bank represents the College's primary banking relationship Linda is not a controlling officer of M&T Bank nor M&T Securities, however, she is the Managing Director of Education Investment Banking for the AICUP Financing Program, and the college has used M&T Securities to market its variable rate bonds in the past, most recently 2010. Fees on the college's primary checking account at M&T Bank totaled \$45,294.33 and fees on the college's merchant credit card account at M&T Bank totaled \$43,642.40 for the fiscal year represented by this tax filling Linden Hustedt, Chair, is a stockholder of Bala Financial Group Bala receives a referral fee from the college's current benefits broker, the Radnor Group. Todd F Lehman, Trustee, is the owner of Interiors, Inc. which supplies furniture, window coverings, as well as interior design services to the college. Mary Ann Morefield, Trustee, is a member of

ldentifier	Return Reference	Explanation
F990_P06_S0B_L11b	· ·	Revenues and expenses are reconciled back to financial statements through worksheets. After preparation by an internal accountant, the IRS Form 990 & 990T complete with all schedules and attachments are given to the Vice President for Finance and the Controller for review. The President also reviews her compensation reported on Part VII and Schedule J/J-2. Next, the forms are reviewed by the Audit Committee of the Board of Trustees, the chair of which is a Certified Public Accountant After the Audit Committee reviews the form, it is posted to Sakai Learning Management System for all Board of Trustee Members to view. (See Line 11b)

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 the July 1 beginning of each fiscal year. All 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

ldentifier	Return Reference	Explanation
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	The College first reviews and participates in compensation surveys, especially including surveys for executive and leadership compensation. Comparative data is then used to establish an appropriate baseline. Based on that comparative median, compensation is chosen within the range of 80-120% of said median. The Executive 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 a compensation package for Vice Presidents, a compensation analysis is prepared and approved by the president.

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

ldentifier	Return Reference	Explanation
F990_P11_S00_L05	Form 990, Part XI, Line 5	Unrealized Security Gains & Losses and Change in Value of Split-Interest Agreements See Schedule D