DLN: 93493135023670 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019 D Employer identification number B Check if applicable MESSIAH COLLEGE □ Address change 23-1352661 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite One College Ave Suite 3010 ☐ Amended return ☐ Application pending (717) 766-2511 City or town, state or province, country, and ZIP or foreign postal code Mechanicsburg, PA  $\,$  17055 G Gross receipts \$ 208,638,339 Name and address of principal officer H(a) Is this a group return for Kım S Phipps ☐Yes **☑**No subordinates? One College Avenue Ste 3010 H(b) Are all subordinates Mechanicsburg, PA 17055 ☐ Yes ☐No ıncluded? **☑** 501(c)(3) **☐** 501(c)( ) **◄** (Insert no ) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► http://www.messiah.edu L Year of formation 1909 M State of legal domicile PA K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities Messiah College is a Christian college of the liberal and applied arts and sciences, offering undergraduate and graduate level programs Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 30 4 26 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 3,370 **6** Total number of volunteers (estimate if necessary) . . . . 6 200 Total unrelated business revenue from Part VIII, column (C), line 12 159,609 **b** Net unrelated business taxable income from Form 990-T, line 34 **Current Year Prior Year** 6,562,057 8 Contributions and grants (Part VIII, line 1h) . 13,625,733 Ravenua 123,543,081 126,811,463 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 12,853,236 7,870,699 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 914,548 1,078,517 150,936,598 142,322,736 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 40,961,047 41,938,177 **14** Benefits paid to or for members (Part IX, column (A), line 4) . . . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 62,416,563 63,073,417 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) ▶2,037,966 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 39,887,925 40,510,269 143,265,535 145,521,863 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . 7,671,063 -3,199,127 Net Assets or Fund Balances Beginning of Current Year End of Year 330,760,394 339,936,919 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 90,209,996 85,809,028 22 Net assets or fund balances Subtract line 21 from line 20 . 249,726,923 244,951,366 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2020-05-14 Signature of officer Sign Here DAVID WALKER VP FOR FINANCE/PLANNING Type or print name and title Print/Type preparer's name Preparer's signature Check 🔲 ıf Paid self-employed Firm's name Firm's EIN ▶ Preparer Use Only Firm's address ▶ Phone no ☐ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

Form	990 (2018)					Page <b>2</b>							
Pa	rt III Stateme	ent of Program Service	e Accomplish	ments									
	Check if S	chedule O contains a resp	onse or note to a	ny line in this Part III		🗆							
1	Briefly describe th	ne organization's mission											
		College is to educate men reconciliation in church a		ard maturity of intelled	t, character, and Christian faith in	preparation for lives of							
2	Did the organizat	ion undertake any significa	ant program serv	ices during the year w	hich were not listed on								
	the prior Form 99	00 or 990-EZ?				🗌 Yes 🗹 No							
	If "Yes," describe	these new services on Sc	hedule O										
3	Did the organization cease conducting, or make significant changes in how it conducts, any program												
		these changes on Schedu				☐ Yes 🗹 No							
4	Describe the orga Section 501(c)(3)	nızatıon's program service	e accomplishment	to report the amount o	largest program services, as meas of grants and allocations to others,								
4a	(Code	) (Expenses \$	128,582,447	including grants of \$	41,938,177 ) (Revenue \$	104,018,860 )							
	See Additional Data		, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,	,							
4b	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	)							
4c	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	)							
4d	Other program se (Expenses \$	ervices (Describe in Sched 0 inc	ule O ) luding grants of \$	3	0 ) (Revenue \$	0)							
4e	Total program s	service expenses ►	128,582,44	<u></u>									

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Pa	t IV Checklist of Required Schedules			
	•		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 2	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	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?  If "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 for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts?  If "Yes," complete Schedule D, Part I	6		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 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏	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, line 10?  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	11b	Yes	

9	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	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	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	Yes	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	

11f

12a

12b

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14a

14b

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Yes

Yes

Yes

Yes

Yes

Yes

Yes

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Nο

No

Nο

No

Nο

Nο

Νo

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)

**20a** Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . .

column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . . . . . . . . . . . . . .

12a Did the organization obtain separate, independent audited financial statements for the tax year?

foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . .

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

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the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🥦

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . . . . . . . . . . Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

rm	990 (2018)			Page
Par	Checklist of Required Schedules (continued)			
			Yes	No
3	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
la	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 through 24d and complete Schedule K If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	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
a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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
;	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?  If "Yes," complete Schedule L, Part II	26	Yes	
,	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	Yes	
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,  Part IV	28a		No
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,	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	
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🐿	29	Yes	
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
	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
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
Ь	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
	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
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
а	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . 1a 163 **b** Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b

 ${f c}$  Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 

**1**c

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7e

7f

7g

7h

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9a

9h

12a

13a

14a

14b

15

No

No

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7d |

10a

10b

11a

11b

12b

13b

13c

Nο

No

No

Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

**b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year? . . . . .

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N . . . . . .

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .

If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as

If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

d If "Yes," indicate the number of Forms 8282 filed during the year . . . .

Sponsoring organizations maintaining donor advised funds.

a Initiation fees and capital contributions included on Part VIII, line 12 . . .

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

Enter the amount of reserves the organization is required to maintain by the states in

Section 501(c)(29) qualified nonprofit health insurance issuers.

Section 501(c)(7) organizations. Enter

Section 501(c)(12) organizations. Entera Gross income from members or shareholders .

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Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions  Check if Schedule O contains a response or note to any line in this Part VI		onse to	lınes 🗸
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 1a 30			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent  1b 26			
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	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		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	
Ь	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	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
Ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to			

7a	. Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more		1 1					
	members of the governing body?	7a		No				
Ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	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?	<b>8</b> a	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	Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)							

6	Did the organization have members or stockholders?	6		No					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7</b> b		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?	<b>8</b> b	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					
	Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)								
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	∍.)						
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.) Yes	No					
	<b>ction B. Policies</b> ( <i>This Section B requests information about policies not required by the Internal Revenue</i> Did the organization have local chapters, branches, or affiliates?	10a		No No					
10a									
<b>10</b> a	Did the organization have local chapters, branches, or affiliates?	10a							
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes						
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes						
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	<b>Yes</b> Yes						

	the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	<b>8</b> b	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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	∍.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did 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	Yes	
	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	16a	Yes	

b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt 16b Section C. Disclosure List the States with which a copy of this Form 990 is required to be filed▶

FL, KY, PA, VA

Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply ☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records

▶DAVID S WALKER CPA One College Ave Suite 3010 Mechanicsburg, PA 17055 (717) 766-2511

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Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	nploy	ees	, Highest Comp	ensated Employ	ees,
	Check if Schedule O contains a	response or no	te to an	y line	≘ ın t	hıs	Part VI	١.			🗆
Section	A. Officers, Directors, Tru	ıstees, Key E	mploy	ees	, an	d F	lighe	st (	Compensated En	nployees	
year .	this table for all persons requir of the organization's current of		·						, ,		•
of compensa	tion Enter -0- in columns (D), ( if the organization's <b>current</b> key	E), and (F) if no	compe	nsatı	on w	vas į	paid		- ,,		
• List the who received	organization's five <b>current</b> high direportable compensation (Box and any related organizations	est compensate	d emplo	yees	(oth	ner t	than a	n off	icer, director, truste	e or key employee)	1
• List all o	of the organization's <b>former</b> office compensation from the organization						pensat	ed e	employees who rece	ived more than \$10	0,000
	f the organization's <b>former dir</b> e , more than \$10,000 of reportat										e
compensated	in the following order individual demployees, and former such p	ersons									
☐ Check tl	nis box if neither the organization	n nor any relate	ed organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee	Т
	(A) Name and Title	(B) Average hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MI3C)	(W- 2/1099- MISC)	related organizations
See Additiona	al Data Table										

Form 990 (2018)													Page <b>8</b>
Part VII Section A. Officers, Direct	tors, Trustees	, Key	Empl			and	High			ed Employees	(conti	inued)	
<b>(A)</b> Name and Title	(B) Average hours per week (list any hours	than c	one bo	ox, u an off	t che unles ficer	eck moss ss pers r and a tee)	son	Repo compe froi organiz	( <b>D)</b> ortable ensation m the zation (W-	(E) Reportable compensation from related organizations (W- 2/1099-MISC)		(F) Estima amount o compens from	ated of other sation the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/109	99-MISC)			organizat relat organiza	ed
See Additional Data Table				H			H						
			igsqcup	<u> </u>		igsqcup	<u> </u>						
	!	<u> </u>	<u> </u>	<u>                                     </u>	<u> </u>	<del> </del>	<u>                                     </u>	<u> </u>			+		
			<del> </del>		$\vdash$	├		<del>                                     </del>		1	+		
		<del>                                     </del>	$\vdash$	$\vdash$	$\vdash$	$\vdash$	$\vdash$	-			+		
			$\vdash$	$\vdash$		$\vdash$	+				+		
				H			$\top$				$\top$		
1b Sub-Total										439,003			
Total number of individuals (including of reportable compensation from the	g but not limited	to thos					rec			· · · · · · · · · · · · · · · · · · ·	1		
					—							Yes	No
3 Did the organization list any <b>former</b> of line 1a? <i>If "Yes," complete Schedule 3</i>			ee, k	ey er	mplo	oyee,	or hid	ghest cor	mpensated	employee on	3		No
For any individual listed on line 1a, is organization and related organization individual										n the	4	Yes	
5 Did any person listed on line 1a receive services rendered to the organization.									tion or ind	vidual for	5	1.2-	No
Section B. Independent Contract  Complete this table for your five high		d indep	ende	nt cc	ntr:	actors	that	received	more than	\$100,000 of cor	mpens	sation	
from the organization Report comper												(C	3
Lobar Associates	and business addre	955							Desc Construction	ription of services		Comper	
PO Box 432 Dillsburg, PA 170190432													
Astroturf Corporation									Turf Installa	tion and Services			888,015
PO BOX 645648 Pittsburgh, PA 152645648 Enginuity LLC									HVAC				531,423
203 Lynndale Ct Mechanicsburg, PA 17050													
Derck & Edson Associates LLP  Land Planners									Architects				478,956
33 S Broad St Lititz, PA 17543										·			222 201
WebpageFX Inc  1705 N Front St Harrisburg, PA 17102									Internet Ma	rketing			323,381
2 Total number of independent contractor compensation from the organization		: not lim	ited t	o th	ose	listed	abov	ve) who r	received m	ore than \$100,00	00 of		
												Form 99	0 (2019)

Part	VII										
		Check if Schedu	le O contains a	respo	onse or note t		this Part VII (A)	 	(B)	(C)	□ (D)
							revenue	1	elated or exempt	Unrelated business	Revenue excluded from
								f	unction	revenue	tax under sections
	1	.a Federated campaig	ins	1a		0		<u> </u>	evenue		512 - 514
ints		<b>b</b> Membership dues		<b>1</b> b		0					
Gra mo		c Fundraising events	· [	1c	33	,779					
Ę,		d Related organization	ons	1d		0					
يَّةٍ قَ		e Government grants (c	ontributions)	1e	966	,817					
Sin		f All other contributions and similar amounts in									
ie iei		above		1f	5,561	,461					
Contributions, Gifts, Grants and Other Similar Amounts		g Noncash contribution in lines 1a - 1f \$	ons included	60	3,973						
Contributions, Gifts, Grants and Other Similar Amounts		h Total. Add lines 1a	-1f				6,562,057				
					Bus	siness Code	0,302,037				
n.	2a	a Tuition and fees				611310	101,8	354,731	101,854,7	731	0 0
Pe v	Ŀ	<b>b</b> Auxiliary Enterprises				611310	22,6	527,579		0 33,79	22,593,782
Program Service Revenue	c	Registration and Other	Fees			611710		329,153	2,164,:	129 165,02	.4 C
Şerv	c	d									
an (	6	 e		_							
ogra	f	<b>f</b> All other program se	ervice revenue					0		0	0 0
4	g	Total. Add lines 2a-2	2f		<b>&gt;</b>	126,811,463	}				
		Investment income (i			nterest, and o	other	5,804,25	59	0	-39,212	5,843,47 <b>1</b>
		similar amounts) . Income from investm			ond proceeds	<u> </u>	27,00		0	0	27,000
				•	•	▶	165,10	)3	0	0	165,103
			(ı) Real		(II) Persoi	nal					
	6a	a Gross rents	2	24,320		0					
	ı	<b>b</b> Less rental expenses		4,711		0					
		c Rental income or	<u> </u>	9,609		0					
		(loss)									
	•	d Net rental income o				<b>•</b>	19,60	)9	0	0	19,609
	7 <i>a</i>	a Gross amount	(ı) Securiti	es	(II) Othe	er					
		from sales of assets other	68,33	32,915		0					
		than inventory									
	ı	<b>b</b> Less cost or other basis and	66,29	3,475		o					
		sales expenses  C Gain or (loss)	2,03	39,440		0					
		<b>d</b> Net gain or (loss)				<u>▶</u>	2,039,44	10	0	0	2,039,440
<b>a</b> .	88	a Gross income from f (not including \$	undraising eve 33,779 c								
uue		contributions reporte	ed on line 1c)	''	]						
eve		See Part IV, line 18		a		11,780					
r R		<b>b</b> Less direct expense <b>c</b> Net income or (loss)		<b>b</b> ng ev		<u> </u>	-5,63	37		0	-5,637
Other Revenue		a Gross income from g	gaming activitie								
0		See Part IV, line 19		а	}						
	ı	<b>b</b> Less direct expense	es	b							
		<b>c</b> Net income or (loss)		activit	ies	<b>▶</b>					
	10	aGross sales of invent returns and allowand									
				a							
	ı	<b>b</b> Less cost of goods s	sold	b							
	•	Net income or (loss)		invent		<u>•</u>					
	11	Miscellaneous <b>1a</b> Earned Discounts	- Kevenue		Business C	.ode 900099	548,70	00	0	0	548,700
		Lameu Discounts								ŭ	- 12/100
	ı	<b>b</b> Management Fees				900099	24,25	59	0	0	24,259
		<b>c</b> Other				900099	326,48	33	0	0	326,483
	•	d All other revenue .						0	0	0	C
	•	<b>e Total.</b> Add lines 11a	a−11d			<b>•</b>	899,44	12			
	12	<b>2 Total revenue.</b> See	Instructions			•	142,322,73	36	104,018,860	159,609	31,582,210
	_							•		,	Form <b>990</b> (2018)

section 4958(c)(3)(B) .

9 Other employee benefits .

a Management . . .

**d** Lobbying . . . . .

**12** Advertising and promotion .

13 Office expenses .

15 Royalties .

16 Occupancy

23 Insurance .

**17** Travel .

14 Information technology

**20** Interest . . . .

f Investment management fees .

11 Fees for services (non-employees)

**10** Payroll taxes . .

**b** Legal .

c Accounting .

7 Other salaries and wages

1,056,309

71,757

163,917

76,182

5,649

13,012

14,956

151,277

40,436

39,860

99,925

15,683

0

n

558

806

85

2,037,966

Form 990 (2018)

n

Statement of Europtional Expenses

6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in

8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) . . .

e Professional fundraising services See Part IV, line 17

(A) amount, list line 11g expenses on Schedule O)

18 Payments of travel or entertainment expenses for any

24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e

25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

federal, state, or local public officials .

22 Depreciation, depletion, and amortization .

**19** Conferences, conventions, and meetings

21 Payments to affiliates . . .

expenses on Schedule O )

a Off Campus Programs

**b** Purchases for Resale

c Compliance Costs

e All other expenses

d Awards/Gifts

g Other (If line 11g amount exceeds 10% of line 25, column

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)										
Check if Schedule O contains a response or note to any line in this Part IX										
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses						
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21										
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22	41,220,445	41,220,445								
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16	717,732	717,732								
4 Benefits paid to or for members										
5 Compensation of current officers, directors, trustees, and	917,843	201,506	428,783	287,554						

0

37,770,475

2,300,267

8,900,081

2,658,695

0

4,600

1,905,115

1,028,538

2,209,103

1,808,176

5,277,014

3,739,500

388,223

1,971,747

11,043,119

1,311,543

3,737,943

110,559

104,294

81,208

128,582,447

92,564

6,390,871

1,780,380

494,172

35.461

59,357

686,668

842,027

95,195

389,736

609,090

439,107

234,464

1,173,501

626,581

0

0

n

97,513

21,494

14,901,450

4,582

492,468

45,217,655

2,864,492

10,844,378

3,229,049

0

41.110

63,957

686,668

2,760,154

1,138,689

2,750,116

1,853,194

5,925,964

4,278,532

638,370

1,971,747

12,216,620

719,145

1,311,543

3,835,456

111,117

105,100

102,787

145,521,863

domestic governments See Part IV, line 21			
Grants and other assistance to domestic individuals. See Part IV, line 22	41,220,445	41,220,445	
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	717,732	717,732	
and 16			

Page **11** 

66,576,964

379.677

8.302.252

85.809.028

185.543.635

18,766,135

40.641.596

244,951,366

330,760,394

Form **990** (2018)

Form 990 (2018)

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21

23

24

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27

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31

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34

Fund Balances

Assets or 30

Net

Liabilities 22 Tax-exempt bond liabilities . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17 - 24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34.

Paid-in or capital surplus, or land, building or equipment fund .

Retained earnings, endowment, accumulated income, or other funds

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total liabilities. Add lines 17 through 25 .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Pa	art X	Balance Sheet					
		Check if Schedule O contains a response or not	e to ar	ny line in this Part IX			🗆
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing			96,306	1	92,585
	2	Savings and temporary cash investments		[	7,189,571	2	5,523,928
	3	Pledges and grants receivable, net			7,388,463	3	6,885,269
	4	Accounts receivable, net		[	2,425,665	4	3,197,089
	5	Loans and other receivables from current and for trustees, key employees, and highest compensar Part II of Schedule L	ited en	nployees Complete	3,667	5	3,667
S	6	Loans and other receivables from other disqualit section 4958(f)(1)), persons described in section contributing employers and sponsoring organizations voluntary employees' beneficiary organizations. Part II of Schedule L	n 4958 itions d (see in	c(c)(3)(B), and of section 501(c)(9) structions) Complete		6	
ssets	7	Notes and loans receivable, net				7	
SSI	8	Inventories for sale or use			573,951	8	579,384
A	9	Prepaid expenses and deferred charges		[	1,282,122	9	1,503,138
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	356,555,864			

ts	7	contributing employers and sponsoring organizations voluntary employees' beneficiary organizations Part II of Schedule L	(see in:	structions) Complete		6 7	
Assets	'	'			570.054	<u> </u>	
S	8	Inventories for sale or use		•	573,951	8	
۱۷	9	Prepaid expenses and deferred charges			1,282,122	9	1
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	356,555,864			
	b	Less accumulated depreciation	<b>10</b> b	205,292,166	156,356,433	10c	151
	11	Investments—publicly traded securities .			130,319,921	11	121
	12	Investments—other securities See Part IV, line	11 .	[	22,092,981	12	26
	13	Investments—program-related See Part IV, line	11 .		2,909,511	13	2
	14	Intangible assets		[		14	
	4-	011 1 6 5 10/1 14			0.200.220	4-	

9	Prepaid expenses and deferred charges		• •	1,282,122	9	1,503,138
10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	356,555,864			
ь	Less accumulated depreciation	10b	205,292,166	156,356,433	10c	151,263,698
11	Investments—publicly traded securities .			130,319,921	11	121,719,059
12	Investments—other securities See Part IV, line	11 .		22,092,981	12	26,448,185
13	Investments—program-related See Part IV, line	11 .		2,909,511	13	2,449,333
14	Intangible assets				14	
15	Other assets See Part IV, line 11			9,298,328	15	11,095,059
16	Total assets.Add lines 1 through 15 (must equ	al line	34)	339,936,919	16	330,760,394
17	Accounts payable and accrued expenses			8,742,209	17	6,359,998
18	Grants payable			2,503,950	18	2,534,749
19	Deferred revenue			4,474,597	19	1,655,388

68,743,571

370.633

5.375.036

90.209.996

192.294.110

18,771,598

38.661.215

249,726,923

339,936,919

20

21

22 23

24

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31 32

33

34

3a

3b

Yes

Yes (2018)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Audit Act and OMB Circular A-133?

### **Additional Data**

Software ID: 18007995

**Software Version:** v1.00

**EIN:** 23-1352661

Name: MESSIAH COLLEGE

Form 990 (2018)

the poor

Form 990, Part III, Line 4a:

Messiah College is a nationally ranked, private Christian college of liberal and applied arts and sciences. Messiah College provides residential undergraduate and online and nonresidential graduate education to approximately 3,200 students. The College conducts research on critical education issues, is involved in community service outreach programs, service missions and cross-cultural experiences. Students, faculty and staff work with community-based partners in local, national, and international settings to address community needs, to provide holistic learning opportunities and to encourage students toward an ethic of discipleship, service and civic engagement. We believe a better world is possible by equipping the next generation now with a space for real-world application of professional disciplines, Christian discipleship, and partnership with

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

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

	for related		$\overline{}$	$\overline{}$	$\overline{}$	$\overline{}$	_	(W- 2/1099-	/W- 2/1099-	organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee		key employee	Highest compensated employee	Former	MISC)	(W- 2/1099- MISC)	related organizations
George A Parmer Chair, Board of Trustees	2	×		×				0	0	0
Craig E Sider Vice Chair, Board of Trustees	2	×		х				0	0	0
Heidi G Bingaman Secretary	2	×		x				0	0	0
Rım A Hınckley	2	x		×				0	0	0

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Secretary
Rım A Hınckley
Treasurer, Board of Trustees
Barbara A Avery
Trustee

Sherrie Bailey

Trustee

Larry Bashore

Trustee
Wendy L Cole

Trustee
Linda D Eremita

Trustee

Trustee

Richard L Godshall

and Independent Contractors

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

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

	for related organizations below dotted line)	Individual or director	Institutiona	Officer	key employee	Highest comp employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
		l trustee vr	nal Trustee		oyee	ompensated				
Anthony Hahn Trustee	0	×						0	0	0
Joachim J Huerter Trustee	2	x						0	0	0
Rıchard E Jordan II Trustee	2	x						0	0	0
J Gary Langmuir Trustee	2	×						0	0	0
6 11	2									

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Garret Larsen Trustee

Emerson L Lesher

Kenneth V Moreland

Barbara G Moses

Rodney L Musser

Trustee James A Martin

Trustee

Trustee

Trustee

Trustee

and Independent Contractors

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless hours per compensation compensation person is both an officer week (list from the compensation from related any hours and a director/trustee) organization organizations from the for related (W- 2/1099-(W- 2/1099-

organization and

0

356,765

0

0

76,945

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

	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
Edward Nevin Trustee	2	×						0	0	0
Linda R Pheasant Trustee	0	×						0	0	0
Marlın Riegsecker Trustee	2	×						0	0	0
Alan Robinson Trustee	0	×						0	0	0
Anthony 1 Schiano	2									

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Anthony J Schlano Trustee

Eunice F Steinbrecher

Kimberly C Thornbury

John C Wagner Jr

Trustee

Trustee

Trustee Jerry L Wenger

Trustee

President

Kim S Phipps

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation

any hours

and Independent Contractors

Valerie Olson

John Chopka

D Kelly Phipps

Kristin M Hansen-Kieffer

Vice Provost/Dean of Students

LLC (Listed avg rep est %)

Director of the Physical Therapy Program

Vice President for Enrollment Management

Sen Adv to VP of Advmt, Pres & CEO Rider Musser Dev

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

and a director/trustee)

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Χ

organization

148,138

146,628

144,001

78,849

105,060

organizations

from the

33,383

33,559

52,524

72,675

15,280

	,				,		′	(1)	(11)	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(Ŵ- 2/1099- MISC)	organization and related organizations
David S Walker  VP for Finance and Planning, Assistant Treasurer	40			×				183,205	0	82,890
Barry G Goodling  VP for Advancement, Assistant Secretary	40			х				182,286	0	35,358
Randall G Basinger Provost	40				×			185,450	0	36,389
Amanda Coffey	40					, ,		140.067		22.202

VP for Advancement, Assistant Secretary	0		^			162,286	o l	
Randall G Basınger	40			x		185.450	0	
Provost	0			, ,		100, 100	Š	
Amanda Coffey	40				_	148,867	0	
Vice President for HR and Compliance	0				^	148,867		

40

40

40

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etil	e GR	APHIC pri	nt - DO NO1	PROCESS	As Filed Data -			DLN: 9	<b>3493135023670</b> OMB No 1545-0047
	m 99	OULE A	Com	plete if the o	Charity Statu rganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) o empt charitable 990 or Form 99	organization or trust. 10-EZ.	r a section	2018 Open to Public
Herna	l Rever	f the Treasury		► Go to	www.irs.gov/Form	990 for the late	est information		Inspection
	e of ti	<b>he organiza</b> LLEGE	tion					Employer identific	cation number
Pa	rt I	Reason	for Public C	harity Stat	<b>us</b> (All organization	s must comple	te this part ) <sup>c</sup>	23-1352661 See instructions	
					e it is (For lines 1 thro			occ monactions.	
1		A church, c	onvention of c	hurches, or as	sociation of churches	described in <b>sec</b>	tion 170(b)(1)	(A)(i).	
2	<b>✓</b>	A school de	scribed in <b>sec</b>	tion 170(b)(	1)(A)(ii). (Attach Sch	nedule E (Form 9	90 or 990-EZ))		
3		A hospital o	or a cooperativ	e hospital ser	vice organization desc	rıbed ın <b>section</b>	170(b)(1)(A)(	iii).	
4		A medical r name, city,		iization operat	ed in conjunction with	a hospital descri	bed in <b>section</b> :	170(b)(1)(A)(iii). E	nter the hospital's
5		-	ation operated (iv). (Complet		t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in <b>section 170</b>
6				•	governmental unit de	scribed in <b>sectio</b>	on 170(b)(1)(A	۱)(v).	
7		section 17	'0(b)(1)(A)(	<b>vi).</b> (Complete			_	ınıt or from the gener	al public described in
8		A commun	ty trust descri	bed in <b>section</b>	170(b)(1)(A)(vi)	(Complete Part I	I)		
9					escribed in <b>170(b)(1)</b> ee instructions Enter				lege or university or a
0		from activit	cies related to cincome and u	its exempt fur inrelated busin	(1) more than 331/39 actions—subject to cer less taxable income (le amplete Part III )	taın exceptions,	and (2) no more	than 331/3% of its s	upport from gross
1					d exclusively to test fo	r public safety S	ee section 509	(a)(4).	
2		more publi	ly supported	organizātions (	d exclusively for the be described in <b>section 5</b> the type of supporting	<b>09(a)(1)</b> or sec	ction 509(a)(2	). See section 509(a	
a		<b>Type I.</b> A so	supporting org n(s) the powe	anızatıon oper	ated, supervised, or cappoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by	
b		manageme	nt of the supp		ervised or controlled i ation vested in the sar and C.				
С					supporting organizatio ions) <b>You must com</b>				ated with, its
d		Type III n	on-functiona integrated T	<b>ally integrate</b> he organizatio	d. A supporting organ n generally must satis rt IV, Sections A and	Ization operated fy a distribution	ın connection wi requirement and	th its supported orgai	
e		Check this	box if the orga	nızatıon recei	ved a written determir	nation from the I		pe I, Type II, Type II	I functionally
f	Enter		or Type III no of supported		integrated supporting	organization			
g				-	upported organization(	s)			
	(i)	Name of supp organization		(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))		anızatıon listed ıng document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
ota	1								
		work Reduc	tion Act Noti	ce, see the Iı	nstructions for	Cat No 11285	5F :	Schedule A (Form 9	90 or 990-EZ) 201

Ŀ	art II Support Schedule for	Organizations	Described in S	ections 170(b)	)(1)(A)(iv), 17	0(b)(	1)(A)(vi)	, and 170
	(b)(1)(A)(ix)							
	(Complete only if you ch						I to qualify	under Part
_	III. If the organization for	alis to quality un	der the tests list	ed below, pleas	e complete Part	111.)		
	Section A. Public Support  Calendar year							
	(or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e)	2018	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not	7,509,276	8,428,745	6,424,005	13,600,733		6,562,057	42,524,816
_	include any "unusual grant ")							
2	Tax revenues levied for the organization's benefit and either paid							
	to or expended on its behalf	0	0	0	0		0	0
3	The value of services or facilities							2
	furnished by a governmental unit to the organization without charge	0	0	0	0		0	0
4	<b>Total.</b> Add lines 1 through 3	7,509,276	8,428,745	6,424,005	13,600,733		6,562,057	42,524,816
5	The portion of total contributions by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5,125,115	0,121,000	20,000,00		7,002,001	,,,
_	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)							
	amount shown on line 11, column (i)							
6	Public support. Subtract line 5							42,524,816
_	from line 4 Section B. Total Support							
_	Calendar year							
	(or fiscal year beginning in) ▶	(a)2014	<b>(b)</b> 2015	(c)2016	( <b>d)</b> 2017	(e).	2018	(f)Total
7		7,509,276	8,428,745	6,424,005	13,600,733		6,562,057	42,524,816
8	Gross income from interest,							_
	dividends, payments received on	5,802,544	3,820,665	3,228,030	5,267,487		5,835,018	23,953,744
	securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business							
-	activities, whether or not the	0	0	0	0		О	0
	business is regularly carried on							
10		237,805	380,943	771,415	714,476		899,442	3,004,081
	or loss from the sale of capital assets (Explain in Part VI )	237,803	300,943	//1,415	/14,4/6		099,442	3,004,081
11								69,482,641
	10							09,462,041
12	Gross receipts from related activities,	etc (see instruction	ons)			12	<u> </u>	104,028,232
13	First five years. If the Form 990 is for	or the organization	's fırst, second, thı	rd, fourth, or fıfth	tax year as a sect	ion 501	(c)(3) organ	nization,
	check this box and <b>stop here</b>						▶⊔	
	Section C. Computation of Publi							
	Public support percentage for 2018 (Iii			olumn (f))		14		61 202 %
	Public support percentage for 2017 Sc					15		64 187 %
16	$_3$ 33 1/3% support test $-2018$ . If the	e organization did r	ot check the box o	on line 13, and line	e 14 ıs 33 1/3% or	more, d	heck this b	ox
	and stop here. The organization qual	ifies as a publicly s	upported organiza	tion				▶ ☑
Ŀ	33 1/3% support test—2017. If th	ne organization did	not check a box o	n line 13 or 16a, a	ind line 15 is 33 1/	3% or r	nore, check	this
	box and stop here. The organization	n qualifies as a pub	licly supported org	anızatıon				▶ □
17	a 10%-facts-and-circumstances tes							
	is 10% or more, and if the organization	n meets the "facts	-and-circumstance	s" test, check this	box and stop her	e. Expl	ain	
	in Part VI how the organization meets	the racts-and-circ	umstances test	rne organization q	qualifies as a public	.iy supp	ortea	. □
	organization	ct2017	capization did set	check a boy or li	ne 13 16n 16h n	r 17	and line	▶□
Ŀ	10%-facts-and-circumstances tes 15 is 10% or more, and if the organization						na inie	
	Explain in Part VI how the organization						ıcly	
	supported organization			-	•	,	•	►□
18	Private foundation. If the organizati	on did not check a	box on line 13, 16	Sa, 16b, 17a, or 17	7b, check this box	and see	<u>;</u>	- —
	instructions							ightharpoons

Page 2

Р	Support Schedule for						
	(Complete only if you c						ler Part II. If
- C	the organization fails to ection A. Public Support	quality under t	ne tests listed	pelow, please co	omplete Part II.	)	
30	Calendar year		43.554.5		413.004-		(0) =
	(or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
_	organization's tax-exempt purpose Gross receipts from activities that are						
3	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
_	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6 )						
36	ection B. Total Support  Calendar year			I	1		1
	(or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
b	income from similar sources Unrelated business taxable income						
D	(less section 511 taxes) from						
	businesses acquired after June 30,						
	1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12							
	loss from the sale of capital assets						
	(Explain in Part VI )						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for	r the organization	's first, second, tl	nird, fourth, or fift	:h tax vear as a se	ction 501(c)(3) c	rganization.
	check this box and <b>stop here</b>	3	, ,	, ,	,	( ), ( )	• □
Se	ection C. Computation of Public	Support Perce	ntage				<u> </u>
15	Public support percentage for 2018 (lin			column (f))		15	
16	Public support percentage from 2017 S					16	
	ection D. Computation of Investi					1 1	
<u> </u>	Investment income percentage for 201			line 13, column (f	·))	17	
18	Investment income percentage from 2	•		,	••	18	
	331/3% support tests—2018. If the		·	on line 14 and lin	ne 15 is more than		ne 17 is not
							_
	more than 33 1/3%, check this box and s						
b	33 1/3% support tests—2017. If the	-			•		_
	not more than 33 1/3%, check this box	and stop here.	The organization	qualifies as a publ	icly supported org	anization	▶⊔_
20	Private foundation. If the organization	on did not check a	box on line 14, 1	.9a, or 19b, check	this box and see	instructions	▶ □

Schedule A (Form 990 or 990-EZ) 2018 Page 4 Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V ) Section A. All Supporting Organizations

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509

(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

3а Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

checked 12a or 12b in Part I, answer (b) and (c) below 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported

organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by 5a

amendment to the organizing document) Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?

5b 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

than (1) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its

6

7

8

answer line 10b below

the organization had excess business holdings)

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

complete Part I of Schedule L (Form 990 or 990-EZ)

8 Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

9a Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI.

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

9b which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

9с

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

>cn	edule A (Form 990 or 990-E2) 2018		F	age 5		
Pa	rt IV Supporting Organizations (continued)					
			Yes	No		
11	Has the organization accepted a gift or contribution from any of the following persons?					
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the					
	governing body of a supported organization?	11a				
b	A family member of a person described in (a) above?	11b				
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	<b>11</b> c				
S	ection B. Type I Supporting Organizations					
			Yes	No		
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1				
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting					
	organization					
S	ection C. Type II Supporting Organizations					
			Yes	No		
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of					
	each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)					
_	<u> </u>					
	ection D. All Type III Supporting Organizations		Yes	No		
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		103	-140		
		1				
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)					
		2				
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard	3				
S	ection E. Type III Functionally-Integrated Supporting Organizations		l			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions)				
	The organization satisfied the Activities Test Complete line 2 below	•				
	b					
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	instru	ctions)			
2	Activities Test Answer (a) and (b) below.	į	Yes	No		
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a				
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement					
,		2b				
3	Parent of Supported Organizations Answer (a) and (b) below.	_				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <b>Part VI.</b>	3a				
	<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in <b>Part VI.</b> the role played by the organization in this regard	3h				

Sched	lule A (Form 990 or 990-EZ) 2018			Page <b>6</b>		
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations			
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) <b>See</b> instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E					
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)		
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3	4				
5	Depreciation and depletion	5				
6						
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8				
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1				
а	Average monthly value of securities	1a				
b	Average monthly cash balances	<b>1</b> b				
С	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)					
2	Acquisition indebtedness applicable to non-exempt use assets	2				
3	Subtract line 2 from line 1d	3				
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by 035	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
	Section C - Distributable Amount		_	Current Year		
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2	Enter 85% of line 1	2				
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
4	Enter greater of line 2 or line 3	4				
5	Income tax imposed in prior year	5				
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6				
7	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrat	ed Type III supporting or	ganızatıon (see		

Schedule A (Form 990 or 990-EZ) (2018)

c Remainder Subtract lines 4a and 4b from 4

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2

If the amount is greater than zero, explain in Part VI

Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.
 Excess distributions carryover to 2019. Add lines.

**a** Excess from 2014. . . . . **b** Excess from 2015. . . . . **c** Excess from 2016. . . . .

See instructions

d Excess from 2017.e Excess from 2018.

3<sub>j</sub> and 4c

8 Breakdown of line 7

Schedule A (	chedule A (Form 990 or 990-EZ) 2018 Page <b>8</b>				
Part VI	Section A, lines 1, 2, Part IV, Section D, lin	mation. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Pa 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, li es 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See	ne 1,		
	Facts And Circumstances Test				
990 Schedule A, Supplemental Information					
Ret	urn Reference	Explanation			

Other income includes earned discounts, cost recovery, management fees, and other miscellaneous revenue

Schedule A, Part II, Line 10

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990.

Open to Public

DLN: 93493135023670 OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

Assets included in Form 990, Part X

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

(Form 990)

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

Name of the organization **Employer identification number** MESSIAH COLLEGE 23-1352661 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1

Cat No 52283D

Schedule D (Form 990) 2018

Sche	dule D	(Form 990) 2018											Page <b>2</b>
Par	t III	Organizations Ma	aintaining Col	lections of <i>I</i>	Art, Histor	ical T	reasu	res, or	Other 9	Similar Ass	<b>sets</b> (conti	nued)	
3	-	g the organızatıon's acq s (check all that apply)	uisition, accessior	n, and other re	cords, check	any of	the foll	lowing t	hat are a	significant us	e of its coll	ection	
а	✓	Public exhibition			d		Loan	or excha	nge prog	rams			
b	<b>✓</b>	Scholarly research			e		Other						
c	<b>✓</b>	Preservation for future	e generations										
4	Provi Part	ide a description of the XIII	organization's col	lections and ex	oplain how th	ney furtl	ner the	organız	atıon's ex	empt purpos	e in		
5		ng the year, did the orga ts to be sold to raise fur								ılar	☐ Yes	☑ N	lo
Pa	rt IV	Escrow and Cust Complete if the ord X, line 21.			n Form 99	0, Part	IV, lır	ne 9, or	reporte	d an amour	nt on Form	າ 990,	Part
1a		e organization an agent ided on Form 990, Part )		an or other into	ermediary fo	r contri	butions	or othe	r assets r	not	☐ Yes	☑ N	lo
b	If "Y	es," explain the arrange	ement in Part XIII	and complete	the following	n table		ſ		An	nount		_
c		nning balance	mene in ruit XIII	ana complete	the following	g table		Ì	1c				_
d	_	tions during the year						İ	1d				_
е		ributions during the year	-					İ	1e				_
f		ng balance						İ	1f				_
2a		the organization include	an amount on Fo	rm 990 Dart Y	( line 21 for	eccrow	or cus	r e leibota	ccount lia	hility2	✓ vos	□ N	_  a
b		es," explain the arrange								•			
	rt V	Endowment Fund											
T.C.		Litaowinent i and	us. Complete ii	(a)Current ye		Prior yea		(c)Two ye		(d)Three year		our yea	rs back
<b>1</b> a	Beginr	ning of year balance .		138,32		134,533			6,049,512		24,490		764,981
b	Contri	butions		1,88	2,261	1,57	1,236		3,078,387	3,2	08,675	2,	158,722
С	Net in	vestment earnings, gair	ns, and losses	5,65	6,700	9,463	3,478	1	2,593,002	-1,1	35,867	-	723,925
d	Grants	s or scholarships		1,45	6,183	1,335	5,956		1,248,678	1,1	48,120	1,	221,402
е		expenditures for facilitie	es	5,90	8,753	5,909	9,610		5,938,414	5,9	99,666	5,	853,886
f	Admın	nistrative expenses .		4	4,050		0		0		0		0
g	End of	f year balance		138,45	2,932	138,322	2,957	13	4,533,809	126,0	49,512	131,	124,490
2	Provi	ide the estimated percei	ntage of the curre	ent year end ba	alance (line 1	Lg, colu	mn (a)	) held a	 5		•		<u>.</u>
а	Boar	d designated or quasi-e	ndowment 🟲	68 %									
b	Perm	nanent endowment 🟲	25 %										
С	Tem	porarily restricted endov	wment 🕨 7	%									
	The p	percentages on lines 2a	, 2b, and 2c shou	ld equal 100%									
3а		there endowment funds nization by	not in the posses	sion of the org	anization tha	at are h	eld and	d admini	stered for	the		V	N
	-	inrelated organizations									3a(i)	Yes	No No
	٠,	related organizations .				· . · .	· . · .				3a(ii)		No
b	• •	es" on 3a(II), are the rel		s listed as req	uıred on Sch	edule R	? .				3b		
4	Desc	cribe in Part XIII the inte	ended uses of the	organization's	endowment	funds							
Pa	rt VI	Land, Buildings, Complete if the org			n Form 99	0, Part	IV, lır	ne 11a.	See For	m 990, Pari	t X, line 1	0.	
	Descr	ription of property	(a) Cost or oth (investme	er basıs (E	) Cost or othe					epreciation		ook valu	е
1a	Land			0		2,7	73,740					- 2	2,773,740
		ngs		0			71,760		1	.35,607,656			1,464,104
		hold improvements		0			29,396			503,268			2,326,128
		ment		0			07,392			69,181,242			0,626,150

1,073,576

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)).

1,073,576

151,263,698

Part VII Investments—Other Securities. Complete if the See Form 990, Part X, line 12.	ne organization ansv	vered "Yes" on Form	990, Part IV, line 11b.
(a) Description of security or category	(b) Book value		ethod of valuation d-of-year market value
(including name of security)  (1) Financial derivatives	0	Cost of en	u-or-year market value
(2) Closely-held equity interests	0		
(A) Local Real Estate Development Company	17,859,640		F
(B) Private Equity, Venture Capital, and Hedge Funds	7,181,215		F
(C) Real Assets - Fund of Funds and Funds Held in Trust and other	450,014		F
(D) Investments - Accrued Net Income Receivable	957,316		F
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	26,448,185		
Part VIII Investments—Program Related.  Complete if the organization answered 'Yes' on F	Form 990, Part IV, lı	ne 11c. See Form 9	90, Part X, line 13.
(a) Description of investment	(b) Book value	(c) M	ethod of valuation d-of-year market value
(1)		COSC OF EI	d of year market value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )	•		
Other Assets. Complete if the organization answered  (a) Description		art IV, line 11d See Fo	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)			
Part X Other Liabilities. Complete if the organization a	nswered 'Yes' on Fo	orm 990, Part IV, lin	• 11e or 11f.
See Form 990, Part X, line 25.  1. (a) Description of liability	(b) B	ook value	
(1) Federal income taxes			
Annuities Payable		3,861,112	
Student Deposits		1,344,959	
Accretion Liability (4)		3,096,181	
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	<b>•</b>	8,302,252	
2. Liability for uncertain tax positions. In Part XIII, provide the text o organization's liability for uncertain tax positions under FIN 48 (ASC 7			
organization's hability for uncertain tax positions under FIN 48 (ASC $ ilde{ m A}$	(40) Check here if the	text of the foothote ha	is been provided in Part XIII 🔟

Part XI

2

а

c

d

3

4

b

5

Part XIII

See Additional Data Table

Return Reference

Schedule D (Form 990) 2018

Page 4

-44,201,274

142,344,864

-22,128

142,322,736

102,919,147

22,128

102,897,019

42,624,844

145.521.863

b

e 3

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Net unrealized gains (losses) on investments . . . .

4

Add lines **4a** and **4b** . . . . . .

c 5 Part XII 1

Donated services and use of facilities . . .

Other (Describe in Part XIII ) . . . . .

Add lines 2a through 2d . . . . . .

**Supplemental Information** 

2 Amounts included on line 1 but not on Form 990, Part IX, line 25

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 

b

Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b .

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . . .

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . . .

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . .

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

4a 4b

2a

2b

2c

2d

2a 2b

2c

2d

4a

4b

Explanation

-22.128

22,128

79,801 42,545,043

-1,464,521

-42,736,753

4c

2e

3

2e 3

4c

5

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018		
Part XIII Supplemental Info	mation (continued)	
Return Reference	Explanation	

Schedule D (Form 990) 2018

## **Additional Data**

**Software ID:** 18007995 **Software Version:** v1.00 **EIN:** 23-1352661

Name: MESSIAH COLLEGE

## Supplemental Information

Return Reference				Explai	nation	
- 1 1 1	 	 	 			

Schedule D, Part III, Line 1

Certain natural history, artwork and other collections are maintained by the College. As permitted by generally accepted accounting principles, the College has not capitalized its donated collections as assets within the Financial Statements.

upplemental Information					
Return Reference	Explanation				
Schedule D, Part III, Line 4	In addition to promoting an engaging campus community, natural history, artwork and other collections are maintained as an educational resource for students and for public display				

.

pplemental Information	
Return Reference	Explanation
hedule D, Part IV, Line 2b	Funds are held in custody for others and funds are held in trust for others

Sur

Supplemental Information	
Return Reference	Explanation
Schedule D, Part V, Line 4	The College uses endowment funds to manage long-term gifts according to donor intent. In a ccordance with Pennsylvania law a certain percentage of the endowment is spent per year. P rogram services, operations and scholarships are funded through the investment income gene rated by the endowment.

S

Supplemental Information						
Return Reference	Explanation					
Schedule D, Part X, Line 2	The College qualifies as a tax-exempt, nonprofit organization under Section 501(c)(3) of t he Internal Revenue Code Accordingly, there is no provision for federal or state income t axes. The College accounts for uncertainties in income taxes in accordance with authoritat ive guidance, which prescribes a recognition threshold of more-likely-than-not to be susta ined upon examination by the appropriate taxing authority. Measurement of the tax uncertainty occurs if the recognition threshold has been met. Management determined there were no tax uncertainties that met the threshold at June 30, 2019 and 2018. The College's policy is to recognize interest related to unrecognized tax benefits in interest expense and penal.					

ties in operating expenses

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XI, Line 2d	Includes financial aid of \$41,938,177 presented as contra revenue for financial statements and \$606,866 of investment expenses net within investment income, and \$191,710 change in the value of split interest and beneficial interest in perpetual trusts and unrealized gains/losses for CGA and Trust Income

S

plemental Information	
Return Reference	Explanation
edule D. Part XI. Line 4b	Includes (\$4.711) rental expenses and (\$17.417) fundraising event expenses

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XII, Line 2d	Includes \$4,711 rental expenses presented as contra rental income and \$17,417 fundraising event expenses presented as contra fundraising event income

upplemental Information	
Return Reference	Explanation
	Includes financial aid of \$41,938,177 presented as contra revenue in the financial stateme nts, and \$606,866 of investment expenses net within investment income

Sι

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135023670 OMB No 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶ Complete if the organization answered "Yes" on Form 990, EZ) Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ. Open to Public ▶ Go to www.irs.gov/Form990EZ for the latest instructions. Inspection Department of the Treasury Namel & the organization **Employer identification number** MESSIAH COLLEGE 23-1352661 Part I YES NO 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 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 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 Does the organization maintain the following? a 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 a Students' rights or privileges? 5a Nο b Admissions policies? 5b Nο 5c c Employment of faculty or administrative staff? Nο d Scholarships or other financial assistance? 5d Nο e Educational policies? 5e Νo f Use of facilities? 5f No g Athletic programs? 5g Nο h Other extracurricular activities? 5h Nο If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a 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 No If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Schedule E (Form 990 or 990-EZ) (2018)

hedule E (Form 990 or 990EZ) (2018)				
<b>Part II</b> Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable Also provide any other additional information (see instructions)				
Return Reference	Explanation			
Schedule E, Part I, Line 3	Racially non-discriminatory policy is described in catalogs, brochures, recruiting activities, and websites			
Schedule E, Part I, Line 6	Federal funds are primarily received for Student Financial Aid programs including the Federal Pell, FSEOG, Work Study, Perkins, Nursing Loan and Direct Loan Programs			

Schedule F (Form 990 or 990-F7) (2018)

efile GRAPHIC print -	DO NOT PE	ROCESS	As Filed Data -	•		DLN:	93493135023670
(Form 990)		nent of	Activities (	Outside the Uni	ted St	ates	OMB No 1545-0047
		lete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, ▶ Attach to Form 990.			i, or 16.	2018	
Department of the Treasury Internal Revenue Service	▶ 6	Go to <i>www.irs</i>		nstructions and the latest in	nformation.		Open to Public Inspection
Name of the organization MESSIAH COLLEGE						Employer iden	tification number
MESSIAH COLLEGE						23-1352661	
Part I General Inf Form 990, Pa			s Outside the U	<b>Inited States.</b> Comple	te If the	organization a	nswered "Yes" to
1 For grantmakers.	Does the orga	anızatıon ma	aintain records to	substantiate the amount	of its gra	nts and	
•	•		the grants or assis	stance, and the selection	criteria u	sed	
to award the grants	or assistance	?					☑ Yes 🗌 No
2 For grantmakers. outside the United S		art V the org	ganization's proce	dures for monitoring the	use of its	grants and otl	ner assistance
3 Activites per Region	(The following	Part I, line 3	table can be dupli	cated if additional space is	needed )		
(a) Region		<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program s	ty listed in (d) is a service, describe cific type of e(s) in region	(f) Total expenditures for and investments in region
See Add'l Data							
3a Sub-total b Total from continuation Part I	n sheets to						
	nd 3b)		0 0				2,370,37

Page **3** 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

Type of grant or assistance	(b) Region	(c) Number of	(d) Amount of	(e) Manner of cash	(f) Amount of	(g) Description	(h) Method of
, ,, ,	<b>,</b>	recipients	cash grant	disbursement	non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other)
See Add'l Data							

Sche	dule F (Form 990) 2018		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	<b>☑</b> No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)	Yes	<b>☑</b> No
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)	<b>✓</b> Yes	□No
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, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐Yes	<b>☑</b> No
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)	<b>✓</b> Yes	□No
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 separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't file with Form 990)	□Yes	<b>☑</b> No

Schedule F (For	m 990) 2018 Page <b>5</b>
Pi ai m	upplemental Information ovide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; nounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting ethod); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide by additional information (see instructions).
990 Schedul	e F, Supplemental Information
Return Reference	Explanation

990 Schedule F, Supplemental Information

Return

Reference	Laplanation
Schedule F, Part I, Line 2	Student financial need is substantiated based on information provided in the Free Application for Federal Student Aid - FAFSA Additionally, some aid is given based on High School GPA or standardized test (SAT or ACT) scores. Title IV funds are handled in accordance with applicable provisions. The Financial Aid program is audited in compliance with the Federal OMB A-133 guidelines and no deficiencies were found during the time period covered by this filing. Financial aid awards result in a reduction to the tuition charge.

Explanation

990 Schedule F, Supplemental Information

Deturn Deference

Return Reference	Explanation
Schedule F, Part	Although the College has investments in foreign corporation/partnerships, transactions do not meet thresholds for additional
l IV	reporting

Evolunation

## **Additional Data**

Central America and the

Caribbean

South America

**Software ID:** 18007995 **Software Version:** v1.00

**EIN:** 23-1352661

Name: MESSIAH COLLEGE

Form 990 Schedule F Part	t I - Activities	Outside The U	Inited States
( ) B	(1) 51 1 6	( ) 11   5	415.4

(a) Region	(b) Number of	(c) Number of	(d) Activities co
	offices in the	employees or	ın region (by typ
	region	agents in	fundraising nr

0

onducted /pe) (re , fundraising, program

(e) If activity listed in (d) is a program service,

(f) Total expenditures for region

region agents in region

describe specific type of service(s) in region

71,808

443

services, grants to recipients located in the

region) 0 Program Services

0 Program Services

Student Cross-Cultural

Student Cross-Cultural

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Europe (including Iceland and Student Cross-Cultural 499,087 0 Program Services Greenland) 279.985 East Asia and the Pacific 0 Program Services Student Cross-Cultural

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) Sub-Saharan Africa Student Cross-Cultural 126,657 0 Program Services East Asia and the Pacific 0 Program Services IBI-Academic 179,549

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Europe (including Iceland and 269.324 0 Program Services IIBI-Academic Greenland) Middle East and North Africa 32,645 0 Program Services IBI-Academic

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) South Asia 106.097 0 Program Services IIBI-Academic East Asia and the Pacific 0 Program Services International Travel 24,111 |Recruiting

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Central America and the 0 Program Services Student Trip -1,304 Carıbbean Collaboratory Europe (including Iceland and Student Trip -0 Program Services Greenland) Collaboratory

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (ı e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Middle Fast and North Africa 0 Program Services Student Trip -3.424 Collaboratory South Asia Student Trip -1.629 0 Program Services Collaboratory

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Sub-Saharan Africa 0 Program Services Student Trip -15,138 Collaboratory Central America and the Study Abroad Scholarship 6.608 0 Program Services Carıbbean lAıd

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Fast Asia and the Pacific 0 Program Services Study Abroad Scholarship 37.677 lAıd Europe (including Iceland and Study Abroad Scholarship 469,125 0 Program Services Greenland) lAıd

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Middle Fast and North Africa 0 Program Services Study Abroad Scholarship 10,464 lAıd South America Study Abroad Scholarship 105.796 0 Program Services lAıd

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Sub-Saharan Africa Study Abroad Scholarship 88.062 0 Program Services lAıd East Asia and the Pacific 0 Program Services Faculty Development

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Europe (including Iceland and Faculty Development 6.083 0 Program Services Greenland) Faculty Development North America (including 0 Program Services 704 Canada and Mexico, but not the United States)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Central America and the 0 Program Services 19,871 Service trips and Carıbbean lmiscellaneous Fast Asia and the Pacific 429 0 Program Services Service Trips and Imiscellaneous

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Europe (including Iceland and 0 Program Services 475 Service trips and Greenland) lmiscellaneous Sub-Saharan Africa 4.815 0 Program Services Service trips and Imiscellaneous

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (e) If activity listed in (d) (d) Activities conducted (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region services, grants to service(s) in region region recipients located in the region) Central America and the 9,000 0 linvestments lInvestments Carıbbean

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of assistance cash grant disbursement valuation (book, non-cash non-cash recipients FMV, appraisal, assistance assistance other) Financial Aid 6.608 Tuition reduction Central America land the Carıbbean

Tuition reduction

37,677

Financial Aid

East Asia and the Pacific

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant (b) Region (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of (c)Number or assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal. other) Financial Aid 50 469.125 Tuition reduction lEurope l(ıncludına Iceland and (Greenland Financial Aid 10.464 Tuition reduction Middle East and North Africa

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) Financial Aid 105,796 Tuition reduction South America Financial Aid 10 88.062 Tuition reduction Sub-Saharan Africa

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

## **Supplemental Information Regarding**

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

**Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a Attach to Form 990 or Form 990-EZ.

DLN: 93493135023670 OMB No 1545-0047

> Open to Public Inspection

Name of the organization MESSIAH COLLEGE

**Employer identification number** 23-1352661 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Solicitation of government grants Phone solicitations ☐ Special fundraising events ☐ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundraiser) fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col (i) contributions? Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

che	dule G (Form 990 or 990-EZ) 2018					F	Page <b>3</b>		
.1	Does the organization conduct gaming	activities with nonmember	rs?		☐ Yes	□No			
.2	Is the organization a grantor, beneficia formed to administer charitable gaming		a member of a partnership or other entity		□Yes				
3	Indicate the percentage of gaming activ	vity conducted in							
а	The organization's facility			13a			%		
b	An outside facility			13b			%		
4	Enter the name and address of the person who prepares the organization's gaming/special events books and records								
	Name ►								
	Address ►								
5a	Does the organization have a contract virevenue?	with a third party from who	om the organization receives gaming		□Yes	□No			
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$								
С	If "Yes," enter name and address of the third party								
	Name ►								
	Address ▶								
16	Gamıng manager ınformation								
	Name ►								
	Gaming manager compensation ▶ \$								
	Description of services provided ▶								
	☐ Director/officer	☐ Employee	☐ Independent contractor						
7	Mandatory distributions								
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?								
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$								
Pai	t IV Supplemental Informatio	n. Provide the explana	tions required by Part I, line 2b, column blicable. Also provide any additional info				 S.		
_	Return Reference		Explanation						

Schedule G (Form 990 or 990-EZ) 2018

DLN: 93493135023670 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury 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 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete If the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization cash (book, FMV, appraisal, noncash assistance or assistance grant or government assistance other) (2)(4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

Schedule I (Form 990) 2018		Damastia Individu			" F 000 Port IV line 22	Page <b>2</b>
Part III can be du	r Assistance to r uplicated if addition	o Domestic Individua onal space is needed	Als. Complete if the organ	nization answered res	" on Form 990, Part IV, line 22	
(a) Type of grant or as	ssistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) See Schedule I, Part IV, S	Statement 1	2592	41,220,445	0	,	
(2)				<u> </u>		
(3)				1		
(4)				1		
(5)						
(6)						
(7)						
Part IV Supplement	ital Informatic	on. Provide the info	ormation required in I	Part I, line 2; Part III	i, column (b); and any other a	additional information.
Return Reference	Explanatio	on				
Schedule I, Part I, Line 2	High School	l GPA or standardized	d test (SAT or ACT) scores	es. Title IV funds are hand	ndled in accordance with applicable	Aid FAFSA Additionally some aid is given based on le provisions Student Financial Aid is treated as a

reduction to tuition. The Financial Aid program is audited in compliance with the Federal OMB A-133 guidelines and no deficiencies were found during the time period. covered by this filing

Schedule I (Form 990) 2018

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Dat	a -	DLN: 934	9313	35023	670		
Schedule J (Form 990)		_					MB No 1545-0047			
		For certain Officer	s, Directors, T	rustees, Key Employees, and High	est					
		Compensated Employees ► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.					2018			
► Attach to Form 990.					Open to Public					
•	Department of the Treasury Internal Revenue Service  To do to www.irs.gov/Form990 for instructions and the latest information.						Open to Public Inspection			
	ne of the organiza	ation			Employer identificat					
MES	SIAH COLLEGE				23-1352661					
Pa	rt I Questi	ons Regarding Compensati	on	<u>.</u>						
							Yes	No		
1a				the following to or for a person listed y relevant information regarding these						
		or charter travel	$\overline{\checkmark}$	Housing allowance or residence for p	ersonal use					
	_	companions		Payments for business use of person						
		nification and gross-up payments	lacksquare	Health or social club dues or initiation						
	☐ Discretion	ary spending account	Ш	Personal services (e g , maid, chauff	eur, cner)					
b		kes in line 1a are checked, did the ill of the expenses described abov		ollow a written policy regarding payme iplete Part III to explain	ent or reimbursement	<b>1</b> b	Yes			
2				or allowing expenses incurred by all r, regarding the items checked in line	1-2	2	Yes			
	directors, truste	es, officers, including the CEO/EX	ecutive Directo	r, regarding the items checked in line	Ia					
3				ed to establish the compensation of the	e					
	_	EO/Executive Director Check all to d organization to establish compe		not check any boxes for methods CEO/Executive Director, but explain in	Part III					
	✓ Compensa	ation committee	П	Written employment contract						
		ent compensation consultant	✓	Compensation survey or study						
		of other organizations	<b>☑</b>	Approval by the board or compensat	ion committee					
4			90, Part VII, Se	ction A, line 1a, with respect to the fil	ing organization or a					
	related organiza									
a		ance payment or change-of-contr				4a		No		
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?					4b 4c		No		
С	Participate in, or receive payment from, an equity-based compensation arrangement?  If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III					40		No_		
	,	, ,	• •							
		), 501(c)(4), and 501(c)(29) o	_	-						
5		ed on Form 990, Part VII, Section ontingent on the revenues of		the organization pay or accrue any						
а	The organization	1?				5a		No		
b	Any related orga					5b		No		
_	•	5a or 5b, describe in Part III								
6		on Form 990, Part VII, Section on the net earnings of	A, line 1a, did	the organization pay or accrue any						
a	The organization					6a		No		
b	Any related orga					6b		No		
7	•	6a or 6b, describe in Part III	التلاحة مسلم	the eventuation provide and newford						
7	payments not d	escribed in lines 5 and 6 <sup>7</sup> If "Yes,"	' describe in Pa			7		No		
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," de	scribe	8		No		
9	If "Yes" on line 5 53 4958-6(c)?	3, did the organization also follow	the rebuttable	presumption procedure described in F	Regulations section	9		140		
For E	Danarwork Body	ction Act Notice, see the Inst	uctions for Ec	orm 990 Cat No. 50	0053T Schedule 1		, 000)	2018		

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 on 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

<b>Note.</b> The sum of columns			are not listed on Form 99 dividual must equal the to		Part VII, Section A, line	la, applicable column (D)	and (E) amounts for tha	t ındıvıdual
(A) Name and Title	1	(B) Breakdown (i) Base	of W-2 and/or 1099-MISC	C compensation (iii) Other	(C) Retirement and other deferred	( <b>D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	<b>(F)</b> Compensation in column (B) reported
	_	compensation	compensation	reportable compensation	compensation			as deferred on prior Form 990
1 Kım S Phipps President	(i)	334,315	0	22,450	24,750	52,195	433,710	
	(ii)	0	0	0	0	0	0	0
vr for i mance and riaming, [	(i)	176,857	3,810	2,538	11,235	71,655	266,095	
Assistant Transurer	(ii)	0	0	0	0	0	0	
3 Barry G Goodling VP for Advancement,	(i)	164,767	3,790	13,729	15,686	19,672	217,644	
Acceptant Socrotary	(ii)	0	0	0	0	0	0	
	(i)	182,415	2,274	762	17,468	18,921	221,840	
	(ii)	0	0	0	0	0	0	
	(i)	144,920	3,810	138	13,123	20,260	182,251	
Compliance	(ii)	0	0	0	0	0	0	
	(i)	132,344	0	15,794	12,767	20,791	181,696	
Thornay Drogram	(ii)	0	0	0	0	0	0	
7 Kristin M Hansen-Kieffer Vice Provost/Dean of	(i)	142,354	2,274	2,000	12,981	39,543	199,152	
Students	(ii)	0	0	0	0	0	0	
	(i)	137,867	2,274	3,861	13,255	59,420	216,677	
Managament	(ii)	0	0	0	0	0	0	
9 D Kelly Phipps Sen Adv to VP of Advmt,	(i)	78,599	0	249	7,296	7,984	94,128	
Pres & CEO Rider Musser Dev LLC (Listed avg rep est %)	(ii)	0	0	0	0	0	0	
	$\dashv$							
	$\dashv$							
	<u> </u>						Schedule	J (Form 990) 2018

Part III Supplemental Inform	nation
Provide the information, explanation, or	descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information
Return Reference	Explanation
	The President is provided housing as a condition of employment for the convenience of the College. The cost of housing is excluded from compensation under IRC Section 119(d). Maintenance, landscaping and housekeeping of this College owned property is provided by the College consistent with all College owned property.

College's expense reimbursement guidelines for supporting documentation are followed for companion travel reimbursement

Page 3

The President is provided housing as a condition of employment for the convenience of the College. The cost of housing is excluded from compensation under IRC Section 119(d) Maintenance, landscaping and housekeeping of this College owned property is provided by the College consistent with all College owned property. Tax indemnification and gross ups. The College includes the tax payment (gross up) for certain payments within an individual's taxable income. Private club dues the College pays for membership dues at a club for the primary purpose to host College business guests. Companion travel. Companion travel is approved on a limited basis. Payment for companion travel with no primary business purpose is considered taxable and included in an employee's compensation. In the event the companion is an employee and/or invited to accompany traveling employee for the primary benefit of the College, travel is excluded from compensation. The

Schedule J (Form 990) 2018

## **Additional Data**

**Software ID:** 18007995 Software Version: v1.00

3,810

3,790

2,274

3,810

2,274

2,274

(B) Breakdown of W-2 and/or 1099-MISC compensation

(ii)

Bonus & incentive

compensation

**EIN:** 23-1352661

Name: MESSIAH COLLEGE

(iii)

Other reportable

compensation

22,450

2,538

13,729

762

138

15,794

2,000

3,861

249

(D) Nontaxable

benefits

52,195

71,655

19,672

18,921

20,260

20,791

39,543

59,420

7,984

(E) Total of columns

(B)(i)-(D)

433,710

266,095

217,644

221,840

182,251

181,696

199,152

216,677

94,128

(F) Compensation in

column (B)

reported as deferred on

prior Form 990

(C) Retirement and

other deferred

compensation

24,750

11,235

15,686

17,468

13,123

12,767

12,981

13,255

7,296

(A) Name and Title

Kim S Phipps

David S Walker

VP for Finance and Planning, Assistant

VP for Advancement, Assistant Secretary

Randall G Basinger

Amanda Coffey

Compliance

Valerie Olson

John Chopka

D Kelly Phipps

est %}

Vice President for **Enrollment Management** 

Vice President for HR and

Director of the Physical Therapy Program

Kristin M Hansen-Kieffer

Sen Adv to VP of Advmt. Pres & CEO Rider Musser Dev LLC (Listed avg rep

Vice Provost/Dean of Students

President

Treasurer Barry G Goodling

Provost

(i) Base Compensation

334,315

176.857

164,767

182,415

144,920

132,344

142,354

137,867

78,599

Form 990, Schedule 3	I, Part II - Officers	, Directors, '	Trustees, Ke	v Employee	es, and Hid	thest Com	pensated Empl	ovees

(1)

(1)

(II)

(1)

(11)

(ı)

(1)

[(II)

(II)

(1)

(II)

(1)

(II)

Form 990, Schedule J,	Part II - Officers,	Directors, Tr

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

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**Supplemental Information on Tax-Exempt Bonds** 

OMB No 1545-0047 2018

DLN: 93493135023670

Schedule K

(Form 990)

▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

Inte	artment of the Treasury rnal Revenue Service		▶Go to <u>www.</u>	► Attach to Form 99 .irs.gov/Form990 for		nforma	tion.						pen to P Inspect	ion	
	e of the organization SSIAH COLLEGE									1 .	oyer ident 352661	tificatio	on numbe	er	
Pa	art I Bond Issues														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(	(f) Description	on of purpose	(g) D	efeased	beh	) On alf of suer		Pool ncing
										Yes	No	Yes	No	Yes	No
A	PHEFA Revenue Bonds Series 2012 LL3	23-2243852	70917R8H1	11-14-2012	12,3	333,026	See P	Part VI			Х		X		X
В	Cumberland County Municipal Authority AICUP Financing Program - Series 2014 T1	23-6003119	230614GU7	05-21-2014	4,7	744,305	See P	Part VI			X		Х		Х
С	Cumberland County Municipal Authority AICUP Financing Program - Series 2015 NN1	23-6003119	230614JL4	09-10-2015	11,2	227,238	See P	Part VI			X		X		Х
D	Cumberland County Municipal Authority AICUP Financing Program - Series 2016 001	23-6003119	230614KMO	05-12-2016	16,3	327,132	See P	Part VI			Х		Х		Х
Pa	art II Proceeds	•								ı					
						A		В		(	С			D	
1	Amount of bonds retired					4,420	,000		0			0			0
2	Amount of bonds legally defease						0		0			0			0
_3	Total proceeds of issue					12,333	3,026		4,744,305		11,227,	,238		16,	327,132
4	Gross proceeds in reserve funds						0		0			0			0
5	Capitalized interest from procee						0		0			0			0
6	Proceeds in refunding escrows .						0		0			0			0
7	Issuance costs from proceeds .					130	,269		84,896		224,	,544			326,542
8	Credit enhancement from proce						0		0			0			0
9	Working capital expenditures from						0		0			0			0
10	Capital expenditures from proce					1,615	<del>.</del>		4,669,419		11,002,	-		16,	000,590
11	Other spent proceeds					10,586	<del>-</del> +		0			0			0
12	Other unspent proceeds Year of substantial completion .				2/		0		0			0		2017	0
13	real of substantial completion .			• •	Yes	013 <b>No</b>		Yes 20:	No No	Yes	17 <b>No</b>		Yes	2017	No
14	Were the bonds issued as part of	of a current refunding	ııssue <sup>7</sup>		163	X		163	X	163	X		163		X
15	Were the bonds issued as part of				X		$\rightarrow$		X		X			_	X
16	Has the final allocation of proce				X		+	×	^	X	^		X		
17	Does the organization maintain proceeds?	adequate books and	records to support t	he final allocation of	X			X		X			X		
Pa	rt III Private Business Us				<u> </u>						<u> </u>				
						A		В		(	<u> </u>			D	
					Yes	No		Yes	No	Yes	No		Yes		No
1 —	Was the organization a partner financed by tax-exempt bonds?	ın a partnership, or a	member of an LLC,	which owned property		X			Х		×				X

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

b

C

d

6

8a

Part IV

b

C

Arbitrage

Page 2

Χ

Х

0 %

0 %

0 %

Χ

Х

No

Х

Χ

Χ

Х

D

Yes

Х

Yes

Χ

Schedule K (Form 990) 2018

D

C

No

X

Χ

0 %

0 %

0 %

Χ

Х

Yes

Χ

No

Χ

Χ

Χ

Χ

Х

C

Nο

Χ

Χ

0 %

0 %

0 %

В

Yes

Χ

Χ

Х

Χ

Χ

No

Χ

Χ

Χ

Χ

Χ

Α

Yes

Χ

Yes

Χ

No

Χ

Χ

Χ

X

No

Х

Χ

0 %

0 %

0 %

Χ

Х

Yes

Х

counsel to review any management or service contracts relating to the financed property?

Are there any research agreements that may result in private business use of bond-financed

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

Enter the percentage of financed property used in a private business use by entities other than

counsel to review any research agreements relating to the financed property?

organization, or a state or local government

Does the bond issue meet the private security or payment test? . . .

Has there been a sale or disposition of any of the bond-financed property to a

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

Rebate not due yet? . . . . . .

Exception to rebate? . . . . . . . . . . . .

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

В

Nο

Explanation Proceeds of this issue were used to fund (i) the advance refunding of the Authority's Revenue Bonds (Association of Independent Colleges and Universities of Pennsylvania Financing Program Messiah College Project) Series 2003 AA3, the proceeds of which were used to finance or refinance various facilities on the

College's campus, (II) reimbursement to the College for costs of an addition to or renovations of the library and construction of a performing arts center, and certain

ladditional miscellaneous capital expenditures relating to campus and (III) the payment of certain costs of issuing the Bonds. Issuance proceeds includes a premium

Χ

Yes

Х

Χ

**Supplemental Information.** Provide additional information for responses to questions on Schedule K (see instructions).

No

Χ

Χ

Yes

Х

Yes

Χ

No

No

Yes

Page 3

No

Nο

D

Yes

Х

Yes

No

Part IV	Arbitrage (Continued)		
		4	

Were gross proceeds invested in a guaranteed investment contract

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

**Procedures To Undertake Corrective Action** 

if self-remediation is not available under applicable regulations?

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

of \$1,503,026

the GIC satisfied? . . . . . . . . .

requirements of section 148? . . .

Return Reference

Schedule K, Part I, Column

f-11/14/2012 12,333,026 PHEFA Revenue Bonds Series 2012 LL3

Schedule K (Form 990) 2018

(GIC)?

period?

Part V

Part VI

Return Reference	Explanation
f-05/21/2014 4,744,305 Cumberland County Municipal	Proceeds of this issue were used to finance certain costs of renovations and improvements to an academic building in order to accommodate the expansion of the engineering programs, construction and installation of other miscellaneous capital improvements to existing facilities and acquisition of capital equipment for use in or in connection with campus facilities, and payment of certain costs of issuing the Bonds Issue proceeds includes a premium of \$244,305

Return Reference	Explanation
f-09/10/2015 11,227,238 Cumberland County Municipal	Proceeds of this issue were used to finance certain costs of (i) the conversion to natural gas as the primary energy source for campus, (ii) certain leasehold improvements to a facility which will hold the college's graduate occupational and physical therapy programs and purchase and installation of furnishings for such programs, (iii) miscellaneous capital expenditures on campus, (iv) and the payment of certain costs of issuing the bonds. Issue proceeds are net of a \$157,762 discount.

Return Reference	Explanation
1-05/12/2016 16,32/,132	Proceeds of this issue were used to finance (i) certain costs of the construction, renovation and equipping of additions to fitness facilities located on campus, (ii) miscellaneous capital projects on campus, (iii) and payment of certain costs of issuing the bonds  Issuance proceeds are net of \$327,868 discount

ef	file GRAPHIC print - DO NO	PROCESS As	Filed Data -									DLN: 9	34931	L3502	3670
	te: To capture the full cont	ent of this docum	ent, please selec	ct landscape mode	(11" x 8.	5") wh	en p	rinting.			ı				
	chedule K	Sur	oplemental I	nformation o	n Tax-E	xemr	ot E	Ronds				_	lo 1545	_	
(F	orm 990)		e organization ans	wered "Yes" to Form	990, Part \	VI, line 2	4a. F		criptions,			2	01	8	
				, and any additional		in Part	VI.					_	_	•	
	ertment of the Treasury ernal Revenue Service			Attach to Form 990 irs.gov/Form990 for		nformati	ion.						n to Pu spection		
	ne of the organization SSIAH COLLEGE									Emplo	yer iden	tification	number	r	
										23-13	52661				
P	art I Bond Issues														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(	<b>f)</b> Descripti	on of purpose	(g) De	efeased	(h) (		(i) I finan	
												ISSU		IIIIai	icing
										Yes	No	Yes	No	Yes	No
Α	Cumberland County Municipal Authority	23-6003119	230614MR7	06-28-2018	6,0	57,533	See P	art VI			X		X		X
	AICUP Financing Program -														
	Series 2018 QQ2														
P	art II Proceeds	1									<u> </u>				
						A		E	3	(	:			D	
1	Amount of bonds retired						0								
2	Amount of bonds legally defeas						0								
3	Total proceeds of issue					6,057,	533								
4	Gross proceeds in reserve fund						0								
5	Capitalized interest from procee						0								
6	Proceeds in refunding escrows						0								
7	Issuance costs from proceeds .					118,	518								
8	Credit enhancement from proce						0								
9	Working capital expenditures fr						0								
10						5,707,	.864								
11							0								
12						231,	151								
13	Year of substantial completion .				20	19									
					Yes	No		Yes	No	Yes	No		Yes	<b></b> '	No
14	Were the bonds issued as part	of a current refunding	ıssue <sup>?</sup>			Х									
15	Were the bonds issued as part	of an advance refundi	ng issue?			×									
16	Has the final allocation of proce	eds been made?				Х									
17	Does the organization maintain proceeds?				Х										
P	art Ⅲ Private Business Us														
						A			3	C				D	
	Mantha against a saite a		mambar of U.C.		Yes	No		Yes	No	Yes	No		Yes	<b></b> '	No
1	Was the organization a partner financed by tax-exempt bonds?	in a partnership, or a	memper of an LLC,	wnich owned property		×									
2		nts that may result in	private business use			Х									
For	Paperwork Reduction Act Noti				Ca	t No 50:	193E		•		S	chedule	K (For	m 990	) 2018

6

8a

Part IV

b

C

Arbitrage

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

Enter the percentage of financed property used in a private business use by entities other than

counsel to review any research agreements relating to the financed property?

organization, or a state or local government

Rebate not due yet? . . . . . . .

Exception to rebate? . . . . . . . . . . . .

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Does the bond issue meet the private security or payment test? . . .

Has there been a sale or disposition of any of the bond-financed property to a

nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

Page 2

D

Schedule K (Form 990) 2018

No

Yes

	bond-financed property?	^			i	
ь	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?					
С	Are there any research agreements that may result in private business use of bond-financed property?	X				

0 %

0 %

0 %

В

No

Yes

C

No

Yes

Х

Χ

Χ

No

Χ

Χ

Χ

Χ

Χ

Α

Yes

Х

Χ

Nο

Explanation

Proceeds of this issue were used to (i) certain renovations to Witmer Student Residence, (ii) a portion of the cost of construction and equipping of a new Welcome

and Admissions Center, (iii) miscellaneous capital expenditures on the College's campus, (iv) paying capitalized interest on the Bonds, and (v) the payment of

Yes

Х

Yes

No

Yes

Nο

Yes

Page 3

Nο

**Supplemental Information.** Provide additional information for responses to guestions on Schedule K (see instructions).

certain costs of issuing the bonds. Issuance proceeds includes a premium of \$557,533

Schedule K (Form 990) 2018

period?

Part V

Part VI

Term of GIC . . . . . . . . . .

requirements of section 148? . . .

Return Reference

f-06/28/2018 6,057,533 Cumberland

Schedule K. Part I. Column

County Municipal Authority

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

**Procedures To Undertake Corrective Action** 

if self-remediation is not available under applicable regulations?

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

etile GKAPHI	C print - DO N	OI PROCES	SASF	iled Data -					DLN	1: 93	4931	.350.	230/0
Schedule L (Form 990 or 990	l-EZ) ► Comple	ete if the orga	anization a	ns with Ir Inswered "Yes Bc, or Form 99	s" on Form 99 0-EZ, Part V,	90, Part IV, li line 38a or 4	nes 25	a, 25	b, 26,		MB No		
			► Atta	ch to Form 990	0 or Form 99	0-EZ.					2(		8
Department of the Tre	asurs	7 00 0	• <u>**********</u>	1904/101111550	or the late.	se mnormation				(	Open		
Internal Revenue Serv Name of the org							Fmr	love	r iden	tifica		pecti	
MESSIAH COLLEGE								_		tille	1011 1	Iuiiib	C.
Part I Exce	ss Benefit Tra	nsactions (	section 501	(c)(3), section !	501(c)(4), and	501(c)(29) or		13526 Ions o					
Comp	lete if the organiz	ation answere	d "Yes" on F	orm 990, Part	IV, line 25a or	25b, or Form	990-EZ,	Part	V, line				
1 (a	) Name of disqua	lified person	(b)	Relationship be	etween disqual organization	ıfıed person an	d  (c	•	scriptio saction			l) Cor 'es	rected? <b>No</b>
											-	es	NO
							-						
3 Enter the a	•				rganization .				\$				
Part II Loc Cor rep (a) Name of	ans to and/or nplete if the organ orted an amount (b) Relationship with organization	From Internization answer form 990, (c) Purpose	rested Perered "Yes" of Part X, line	r <b>sons.</b> n Form 990-EZ,				n t? Ap	ne 26, (h) pprove	ed by	(	ganıza <b>i)</b> Wrıt greem	ten
Part II Loc Cor rep (a) Name of	ans to and/or nplete if the orgai orted an amount	From Internization answer form 990, (c) Purpose	rested Pered "Yes" o Part X, line (d) Loan orga	rsons. n Form 990-EZ, 5, 6, or 22 to or from the anization?	Part V, line 3	8a, or Form 99 <b>(f)</b> Balance	(g) I defaul	n t? Ap	ne 26, (h) pprove board ommitt	ed by or tee?	<b>(</b>	<b>i)</b> Writ greem	ten ent?
Part II Loc Cor rep (a) Name of nterested person	ans to and/or nplete if the orgai orted an amount (b) Relationship with organization	From Internization answer form 990, (c) Purpose	rested Perered "Yes" of Part X, line	rsons. n Form 990-EZ, 5, 6, or 22 to or from the	Part V, line 3	8a, or Form 99 <b>(f)</b> Balance	(g) II defaul	n t? Ap	(h) pprove board ommitt	ed by	(	<b>i)</b> Writ greem	ten
Part II Lo. Cor rep (a) Name of nterested person	ans to and/or nplete if the orgai orted an amount (b) Relationship with organization	From Internization answer on Form 990, (c) Purpose of Ioan	rested Pered "Yes" o Part X, line (d) Loan orga	rsons. n Form 990-EZ, 5, 6, or 22 to or from the anization?  From	(e)Original principal amount	8a, or Form 99 <b>(f)</b> Balance due	(g) II defaul	n t? Ap	(h) pprove board ommitt	ed by or tee?	( ac	<b>i)</b> Writ greem	ten ent?
Part II Lo. Cor rep (a) Name of nterested person	ans to and/or nplete if the orgai orted an amount (b) Relationship with organization	From Internization answer on Form 990, (c) Purpose of Ioan	rested Pered "Yes" o Part X, line (d) Loan orga	rsons. n Form 990-EZ, 5, 6, or 22 to or from the anization?  From	(e)Original principal amount	8a, or Form 99 <b>(f)</b> Balance due	(g) II defaul	n t? Ap	(h) pprove board ommitt	ed by or tee?	( ac	<b>i)</b> Writ greem	ten ent?
Part II Loc Cor rep (a) Name of nterested person	ans to and/or nplete if the orgai orted an amount (b) Relationship with organization	From Internization answer on Form 990, (c) Purpose of Ioan	rested Pered "Yes" o Part X, line (d) Loan orga	rsons. n Form 990-EZ, 5, 6, or 22 to or from the anization?  From X	(e)Original principal amount	8a, or Form 99 <b>(f)</b> Balance due	(g) II defaul	n t? Ap	(h) pprove board ommitt	ed by or tee?	( ac	<b>i)</b> Writ greem	ten ent?
Part II Loc Cor rep (a) Name of nterested person	ans to and/or nplete if the orgai orted an amount (b) Relationship with organization	From Internization answer on Form 990, (c) Purpose of Ioan	rested Pered "Yes" o Part X, line (d) Loan orga	rsons. n Form 990-EZ, 5, 6, or 22 to or from the anization?  From X	(e)Original principal amount	8a, or Form 99  (f)Balance due  3,667	(g) II defaul	n t? Ap	(h) pprove board ommitt	ed by or tee?	( ac	<b>i)</b> Writ greem	ten ent?
Correp  (a) Name of Interested person  (1) John Chopka	ans to and/or nplete if the organorted an amount  (b) Relationship with organization  Vice President	From Internization answer on Form 990,  (c) Purpose of Ioan  Graduate Aid	rested Perered "Yes" o Part X, line (d) Loan orga	rsons. n Form 990-EZ, 5, 6, or 22 to or from the anization?  From X	(e)Original principal amount  51,167	8a, or Form 99  (f)Balance due  3,667	(g) II defaul	n t? Ap	(h) pprove board ommitt	ed by or tee?	( ac	<b>i)</b> Writ greem	ten ent?
Part II Loc Correp  (a) Name of nterested person  (1) John Chopka  Fotal  Part III Gra Con	ans to and/or nplete if the orgal orted an amount  (b) Relationship with organization  Vice President  Vice President	From Internization answer on Form 990,  (c) Purpose of loan  Graduate Aid  nce Benefit anization an	rested Pered "Yes" o Part X, line (d) Loan orga  To  To  ting Inter swered "Y	rsons. n Form 990-EZ, 5, 6, or 22 to or from the anization?  From X  ested Perso es" on Form 9	(e)Original principal amount  51,167  \$\$\$	8a, or Form 99  (f)Balance due  3,667  3,667	(g) II defaul	n t? Ap	(h) pprove board ommitt Yes	or tee? No	Yes Yes	i)Writi	ten ent?
Part II Loc Correp  (a) Name of nterested person  (1) John Chopka  Total  Part III Gra Con	ans to and/or replete if the organ orted an amount  (b) Relationship with organization  Vice President  onts or Assista replete if the organization  (i)	From Internization answer on Form 990,  (c) Purpose of loan  Graduate Aid	rested Perered "Yes" of Part X, line  (d) Loan orgation o	rsons. n Form 990-EZ, 5, 6, or 22 to or from the anization?  From X	(e)Original principal amount  51,167  \$\$\$	8a, or Form 99  (f)Balance due  3,667	(g) II defaul	n t? Ap	(h) pprove board ommitt Yes	or tee? No	Yes Yes	i)Writi	ten ent?
Part III Loc Cor rep  (a) Name of nterested person  (1) John Chopka  Total  Part III Gra Con (a) Name of Interested	ans to and/or nplete if the organ orted an amount  (b) Relationship with organization  Vice President  Ints or Assista nplete if the organization  rested person (I	From Internization answer on Form 990,  (c) Purpose of loan  Graduate Aid  nce Benefit anization and on Relationship terested person	rested Perered "Yes" of Part X, line  (d) Loan orgate  To  To  ting Interswered "Yes of between on and the cition	rsons. n Form 990-EZ, 5, 6, or 22 to or from the anization?  From X  ested Perso es" on Form 9	(e)Original principal amount  51,167  \$\$\\$\$\$\$ \$\$ \$\$ \$\$ \$90, Part IV, of assistance	8a, or Form 99  (f)Balance due  3,667  3,667	(g) II defaul	n t? Ap	ne 26,  (h) pprove- board ommitt Yes  (e	or tee? No No	Yes Yes rpose	i)Writingreem	no No
Part III Loc Cor rep (a) Name of nterested person (1) John Chopka  Total  Part III Gra	ans to and/or nplete if the organ orted an amount  (b) Relationship with organization  Vice President  Ints or Assista nplete if the organization  rested person (I	From Internization answer on Form 990,  (c) Purpose of loan  Graduate Aid  nce Benefit anization an on Relationship terested person organization endents of Both anization and pendents of Both anization aniza	rested Perered "Yes" of Part X, line  (d) Loan orgate  To  To  ting Interswered "Yes of between on and the cition	rsons. n Form 990-EZ, 5, 6, or 22 to or from the anization?  From X  ested Perso es" on Form 9	(e)Original principal amount  51,167  \$\$\\$\$\$\$ \$\$ \$\$ \$\$ \$90, Part IV, of assistance	8a, or Form 99  (f)Balance due  3,667  3,667  line 27.  (d) Type of	(g) II defaul	n t? Ap	ne 26,  (h) pprove- board ommitt Yes  (e	ed by or tee? No No No dent	Yes Yes rpose	i)Writingreem	nten ent?
Part III Loc Cor rep  (a) Name of nterested person  (1) John Chopka  Total  Part III Gra Con (a) Name of Interested	ans to and/or nplete if the organ orted an amount  (b) Relationship with organization  Vice President  Ints or Assista nplete if the organization  rested person (I	From Internization answer on Form 990,  (c) Purpose of loan  Graduate Aid  nce Benefit anization an on Relationship terested person organization endents of Both anization and pendents of Both anization aniza	rested Perered "Yes" of Part X, line  (d) Loan orgate  To  To  ting Interswered "Yes of between on and the cition	rsons. n Form 990-EZ, 5, 6, or 22 to or from the anization?  From X  ested Perso es" on Form 9	(e)Original principal amount  51,167  \$\$\\$\$\$\$ \$\$ \$\$ \$\$ \$90, Part IV, of assistance	8a, or Form 99  (f)Balance due  3,667  3,667  line 27.  (d) Type of	(g) II defaul	n t? Ap	ne 26,  (h) pprove- board ommitt Yes  (e	ed by or tee? No No No dent	Yes Yes rpose	i)Writingreem	nten ent?

(a) Name of interested person (d) Description of transaction (e) Sharing (b) Relationship (c) Amount of between interested transaction of person and the organization's organization revenues? Yes No See Additional Data Table Part V Supplemental Information ctions)

Provide additional informa	tion for responses to questions on Schedule L (see instruc
Return Reference	Explana
Schedule L, Part IV	Compensation presented within Schedule L is per the res

Provide additional init	ormation for responses to questions on Schedule E (see instructions)
Return Reference	Explanation
Schedule L, Part IV	Compensation presented within Schedule L is per the respective organization's tax year and represents activity greater than \$10,000 Messiah College's fiscal year is 6/30 and Rider Musser Development LLC's fiscal year end is 12/31 Service Provider - Payments to service providers of the College meeting disclosure threshold Compensation - Messiah College Compensation is considered fair market value and is determined pursuant to the respective organization's Human Resources compensation practices. Listed individuals are not supervised by their respective spouse. Compensation - Rider Musser. Rider Musser Development LLC is a for profit corporation whose purpose, as described on their website, is to create a new residential neighborhood and business park that will generate tax revenue and jobs, while enhancing the community by offering conveniences to local residents, as well as students and faculty of nearby Messiah College. Rider Musser Development Corporation LLC is presented in the College's financial statements as one of its real estate related investments. The College's investment in Rider Musser Development LLC was approved by the College's Board of Trustees in keeping with the College's conflict of interest policy. Although Messiah College is the primary investor (as of the date of this return), Rider Musser Development LLC is a separate entity and seeks to maintain an "arms length" relationship with the College. Rider Musser Development LLC is governed by a joint resolution and operating agreement which delegates powers of Messiah College to an independent Board of Directors as allowed under Pennsylvania law.

## **Additional Data**

J Gary Langmuir

Larry Bashore

**Software ID:** 18007995 **Software Version:** v1.00 **EIN:** 23-1352661 Name: MESSIAH COLLEGE

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

· · · · · · · · · · · · · · · · · · ·		orring arreer corea i	0.000
(a) Name of interested person	(b) Relationship between interested person and the	(c) Amount of transaction	(d) Descrip

organization

Shareholder-Wohlsen

President-Edwin L Heim

Construction

Company

4,953,250 | Service Provider - Construction

110,153 | Service Provider-Mechanical

**Electrical Construction** 

Services

iption of transaction

(e) Sharing organization's revenues?

Yes

No No

No

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (a) Name of interested person (b) Relationship (c) Amount of (d) Description of transaction (e) Sharing between interested transaction person and the organization's organization revenues? Yes No D Kelly Phipps Spouse of President 115.566 Compensation-Rider Musser Nο Development

94,914 Compensation

No

Spouse of Interested

Person

Scott Kieffer

(a) Name of interested person

(b) Relationship between interested person and the organization

(c) Amount of transaction

(d) Description of transaction of organization of organization's revenues?

Yes No

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

Person

Spouse of Interested

Debra Chopka

				163	110
D Kelly Phipps	Spouse of President	80,667	Compensation-Messiah College		No

18.056 | Compensation

Nο

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

(a) Name of interested person

(b) Relationship between interested person and the organization

(c) Amount of transaction of organization's revenues?

11.802 | Compensation

No

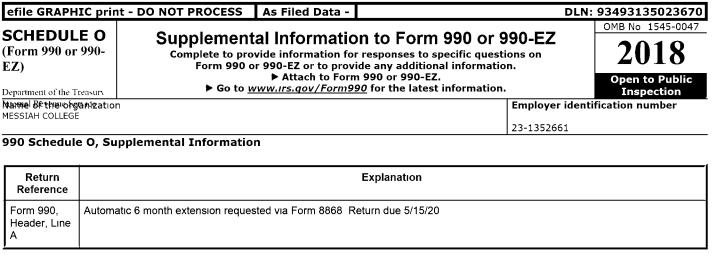
person and the organization		organiza reven	
		Yes	Nο

Spouse of Officer

Beverly Goodling

efil	e GRAPHIC pr	int - DO NOT PF	ROCESS	As Filed Data -			DLN:	9349313	5023	670
	IEDULE M			loncash Contri	hutions			OMB No 1	545-0	047
(For	Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.					)				
		► Attach to Form								
Intern	tment of the Treasury al Revenue Service		gov/Form9	190 for the latest informat				Open to Inspe	ction	
	e of the organızat IAH COLLEGE	ion				Emplo	yer ident	ification n	umber	•
						23-13	52661			
Pa	rt I 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 1g	ı		(d) of determi ntribution a		s
1	Art—Works of art	t	Х	2		Comp	arable sale	es		
2	Art—Historical tr	easures .								
3	Art—Fractional in	nterests								
4	Books and public		X		1	Comp	arable sale	es		
5	Clothing and hou									
6	goods Cars and other v	ehicles				1				
7	Boats and planes					1				
8	Intellectual prope									
9	Securities—Public	cly traded .	Х	22	325,448	Stock	exchange			
10	Securities—Close	ely held stock .								
11	Securities—Partr									
4.2	or trust interest Securities—Misce					-				
13	Qualified conserve contribution—Hi	vation storic								
14	structures . Qualified conserve contribution—Of	/ation								
15	Real estate—Res	idential .	Х	2	245,000	Appra	aisal			
16	Real estate—Cor	nmercial								
17	Real estate—Oth	er								
18	Collectibles .									
19	Food inventory					-				
20	Drugs and medic	• •	<u></u>	3	-	0.00				
21	Taxidermy . Historical artifact		X	2	4	Comp	arable sale	25		
	Scientific specim					1				
	Archeological art									
25	Other ▶ (	<del>-</del>	X	3	3	Comp	arable sale	es		
<u>Othe</u>	r - Equipment )									
Othe	Other ► ( r - Program Supp		X	4	1,018	Comp	arable sale	es		
27 28	Other ▶ (	•				+				
	•		the organiza	I ation during the tax year for	contributions	+				
23				3, Part IV, Donee Acknowled		29				2
	_	•			-				Yes	No
30a	must hold for at	least three years fr	om the date	y contribution any property is e of the initial contribution, a				npt <b>30</b> a		l No
b	If "Yes," describ	e the arrangement	ın Part II					304		No_
31	Does the organi	zation have a gift ac	cceptance p	olicy that requires the review	v of any nonstandard contri	bution:	5?	31	Yes	
	contributions?			or related organizations to s	olicit, process, or sell nonca	sh •		32a	Yes	<u> </u>
	If "Yes," describ  If the organizati  describe in Part	on dıd not report ar	n amount in	column (c) for a type of pro	perty for which column (a)	ıs chec	:ked,			
Eor D		nn Act Notice, see the	a Instruction	ns for Form 990	Cat. No. 512271		School	lule M (Form	000)	2018)

Schedule M (Form 990) (2018)	Page <b>2</b>
	tion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part umber of contributions, the number of items received, or a combination of both. Also complete
Return Reference	Explanation
Schedule M, Part I	Column (b) reflects number of contributors
Schedule M, Part I, Line 32b	Yes, a third-party appraisal is used for certain significant donations such as property
_	Schedule M (Form 990) (2018)



990 Schedule O, Supplemental Information

Return Explanation

Neicrence	
Form 990, Part VI, Section A, Line 2	Family relationship with Other Officer, Trustee, or Key Employee President Kim Phipps has a family relationship, Barry Goodling has a family relationship, Kristin Hansen-Kieffer h as a family relationship D Kelly Phipps has a family relationship Compensation amounts p aid to employees are shown on Schedule L. Amounts were paid at fair market value and are c onsistent with levels of compensation that would have been paid to other parties had they rendered these services to the College, regardless of relation

Return Explanation

Form 990,	Form is compiled using information provided by respective departments and reviewed by mana
Part VI,	gement for completeness and accuracy On a bi-annual basis, the College engages an externa
Section B,	I accounting firm to review the Form Board of Trustee meeting materials include an electr
Line 11b	onic copy of the Form, making it available for review of all members prior to filing. The
	Assurance Committee meeting includes a presentation summary of the Form and allows time fo
	r members to ask questions and provide clarifications

Return Reference	Explanation
Form 990, Part VI, Section B, Line 12c	The College monitors and enforces compliance with its conflict of interest policy through an annual disclosure process. Each Trustee and Officer of Messiah College completes a disc losure statement which certifies that they have reviewed the College's Conflict of Interes t Policy and discloses personal, familial, and/or business relationships that may in fact or appearance give rise to a conflict of interest. If an actual, potential or apparent con flict arises between the annual filings of the disclosure statements the Trustee or Office r is required to promptly and fully disclose the potential conflict to the Chairperson of the Board. Each actual or potential conflict is addressed on a case-by-case basis by the Chairperson in consultation with the Assurance Committee. The Chairperson and Assurance Committee shall determine if the payments to be made are fair and reasonable, or if otherwise required by the Bylaws and if deemed advisable, refer the transaction to a vote of the Board of Trustees. A Trustee or Officer who is deemed to have a conflict of interest is disqualified from participating in the portion of any meeting of the Board of Trustees which a uthorizes the contract or other transaction.

Return Reference	Explanation
Form 990, Part VI, Section B, Line 15	The Executive Committee of the Board of Trustees reviews the President's performance and r ecommends a compensation package to the Board of Trustees for approval. The President reviews performance and approves compensation packages for the Provost and Vice Presidents. To assess reasonableness of compensation, the College participates in executive and leadersh ip compensation surveys as well as other general compensation surveys. Participating in the survey provides access to comparative data and fair market values for the higher education industry which is used to determine a comparative median and compensation range. Compensation decisions are reflected in the President's employment agreement and in salary letters for Officers and Employees.

Return Explanation
Reference

Form 990,
Part VI,
Section C,
Line 19

The College makes its Bylaws, Conflicts of Interest Policy and Financial Statements availa
ble to the public via its website. Additional governing documents are available upon reque

Return Explanation
Reference

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Form 990,	Other Changes in net assets includes \$(198,038) change in value of split interest agreemen
Part XI, Line	ts, \$107,127 charitable gift annuities and trusts and \$(20,996) in beneficial interest in
9	perpetual trusts

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -										DLN: 93493	135023	670
SCHEDULE R (Form 990)	<b>▶</b> C	Related Complete if the organ	ization ar	swered "Yes ▶ Attach to	s" on Form Form 990.	n 990, Parl	: IV, line 33	, 34, 35b,		37.			1545-004 18 o Public	
Department of the Treasury Internal Revenue Service													ection	
Name of the organization MESSIAH COLLEGE									Empl	oyer identif	ication	number		
										352661				
Part I Identification	of Disregarded E	ntities Complete if t	he organ	ization answ	ered "Yes	" on Form	990, Part	IV, line 3	3.					
Name, address, and	(a) EIN (if applicable) of disre	garded entity		(b) Primary a			c) ncile (state n country)	( <b>d)</b> Total inc	ome	<b>(e)</b> End-of-year as	ssets	( <b>1</b> Direct co ent	ntrolling	
Part II Identification of related tax-exen	of Related Tax-Exe npt organizations du		<b>s</b> Comple	ete if the org	anızatıon	answered	"Yes" on F	orm 990,	Part IV	, line 34 be	cause	ıt had one or	more	
Name, address, an	<b>(a)</b> d EIN of related organızatı	on	Prim	<b>(b)</b> ary activity	Legal dom			(d) Exempt Code section		(e) narity status n 501(c)(3))	Dir	<b>(f)</b> rect controlling entity	Section (13) cor enti	512(b) trolled
_														
_														
For Paperwork Reduction Ac	t Notice, see the Inc	tructions for Form 9	90.		Ca	nt No 5013					Schr	edule R (Form	990) 20	18

Part III Identification of Related Organizations Taxabl				ıf the o	rganız	ation a	nswer	ed "Ye	es" on	Form 9	90, Par	t IV, l	ine 34	· beca	use i	t had	d
one or more related organizations treated as a part	nership durin	g the	tax year.														
	1	41.	1 ( ) 1		1	, ,				, I	41.				<i>(</i> '')		

(a) Name, address, and EIN of related organization		<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	( <b>h</b> Dispropi allocat	rtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			General or managing partner?		<b>(k)</b> Percentage ownership
					314)			Yes	No		Yes	No			
												$\vdash$			
												$\vdash$			
1															
ı															
Down TV I I doublification of Doloted Ownership	tions Touchlo os - C-		- T	L Composite			 	    an    -		00 Doub 11/	السا	24			
Part IV Identification of Related Organiza						ation ansv	verea "Yes	on Fo	orm 99	o, Part IV,	ııne	34			
because it had one or more related or	ganizations treated as a	corporatio	n or tru	ist auring tr	ie tax year.										
(a)	(b)		(c)	D	(d)	(e)	(f)		(g)	(H			(i)		
Name, address, and EIN of	Primary activity		Legal	Direc	t controlling Type	e or entity	Share of total		of end-	of- Perce			Section 512		

									-
Part IV Identification of Related Organiz because it had one or more related or					swered "Yes'	' on Form 990,	Part IV, line 34		
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	Share of total Income Share of end-of-year assets		(h) Percentage ownership	Section (b)(conti	i) on 512 (13) rolled aty?
(1)Charitable Unitrusts (12)  Messiah College One College Avenue Mechanicsburg, PA 17055	Trust	PA	N/A	Т					No
(2)Rider Musser Development LLC 5 Kacey Ct Ste 204 Mechanicsburg, PA 17055 46-5723360	Real Estate Development/Leasing	PA	Messiah College	С		17,859,640	100 %	Yes	
						Sch	edule R (Form 9	990) 20	018

Schedule K (Form 990) 2018		Pa_	ige <b>3</b>
Part V Transactions With Related Organizations Complete of the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)	1b		No
c Gift, grant, or capital contribution from related organization(s)	. 1c		No
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	<b>1</b> g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1 <u>j</u>		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No

g Sale of assets to related organization(s)	<b>1</b> g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	11	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	No
l Performance of services or membership or fundraising solicitations for related organization(s)	. 11	No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	No
o Sharing of paid employees with related organization(s)	10	No
p Reimbursement paid to related organization(s) for expenses	1p	No
<b>q</b> Reimbursement paid by related organization(s) for expenses	1q	No
r Other transfer of cash or property to related organization(s)	1r '	Yes
s Other transfer of cash or property from related organization(s)	1s	No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds		

(b) Transaction type (a-s) (d) Method of determining amount involved (a) Name of related organization (c) Amount involved (1)Rider Musser Development LLC 6,264,000 Cash and land fair market value - Amount included as investment on balance sheet Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(1) General o managin partner	g	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
													_
													_
	•								•	Schedul	e R (Forn	1 99	0) 2018

