DLN: 93493139008700 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 Department of the ► Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Internal Revenue Service For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019 C Name of organization D Employer identification number B Check if applicable THE BOARD OF DIRECTORS OF ☐ Address change WITTENBERG COLLEGE 31-0537177 ☐ Name change Doing business as ☐ Initial return WITTENBERG UNIVERSITY ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) 200 WEST WARD STREET ☐ Amended return ☐ Application pending (937) 327-7025 City or town, state or province, country, and ZIP or foreign postal code SPRINGFIELD, OH $\,$ 45501 $\,$ G Gross receipts \$ 119,204,399 Name and address of principal officer H(a) Is this a group return for DR MICHAEL FRANDSEN □Yes **☑**No subordinates? 200 WEST WARD STREET H(b) Are all subordinates SPRINGFIELD, OH 45501 ☐ Yes ☐No included? Tax-exempt status **☑** 501(c)(3) **☐** 501(c)() **◄** (Insert no) ☐ 527 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ WWW WITTENBERG EDU Website: ▶ L Year of formation 1845 ${f M}$ State of legal domicile K Form of organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities WITTENBERG UNIVERSITY PROVIDES A LIBERAL ARTS EDUCATION DEDICATED TO INTELLECTUAL INQUIRY AND WHOLENESS OF PERSON WITHIN A DIVERSE RESIDENTIAL COMMUNITY REFLECTING ITS LUTHERAN HERITAGE, WITTENBERG CHALLENGES STUDENTS TO BECOME RESPONSIBLE GLOBAL CITIZENS, TO DISCOVER THEIR CALLINGS, AND TO LEAD PERSONAL, PROFESSIONAL, AND CIVIC LIVES Activities & Governance OF CREATIVITY, SERVICE, COMPASSION, AND INTEGRITY Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 3 27 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 1,739 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 75 Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 7a 71,116 b Net unrelated business taxable income from Form 990-T, line 34 7b 69,986 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 24,290,897 7,893,660 Ravenue 80,533,879 79,107,045 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 7,355,765 6,394,697 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -244,906 -84,920 110,974,567 94,271,550 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 39.752.278 39.186.835 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 27,457,482 28,100,144 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶2,579,629 25,645,905 23,982,035 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 92,855,665 91,269,014 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12 . 18,118,902 3,002,536 Assets or d Balances Beginning of Current Year End of Year 209,526,257 20 Total assets (Part X, line 16) . 235,606,488 21 Total liabilities (Part X, line 26) . 65,387,321 59,688,024 Net assets or fund balances Subtract line 21 from line 20 . 170,219,167 149,838,233 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 2020-05-11 Signature of officer Date Sign Here ROBERT G YOUNG VP FINANCE & ADMINISTRATION Type or print name and title Print/Type preparer's name Date 2020-05-**1**1 Preparer's signature Check | If P00368385 **Paid** self-employed Firm's name RSM US LLP Firm's EIN > 42-0714325 Preparer **Use Only** Firm's address ▶ 6 S PATTERSON BLVD Phone no (937) 298-0201 DAYTON, OH 45402 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2018) Cat No 11282Y

	1 990 (2018)					Page 2
Pa	art III Statement	of Program Servi	ce Accomplis	hments		
	Check if Sche	dule O contains a resp	onse or note to a	any line in this Part III		🗹
1	Briefly describe the o	rganızatıon's mıssıon				
DIVE GLO	RSE RESIDENTIAL CO	MMUNITY REFLECTING COVER THEIR CALLING	G ITS LUTHERAN	HERITAGE, WITTENBE	ELLECTUAL INQUIRY AND WHOLEI RG CHALLENGES STUDENTS TO I IONAL, AND CIVIC LIVES OF CRE	BECOME RESPONSIBLE
2	Did the organization	undertake any signific	ant program ser	vices during the year w	hich were not listed on	
	the prior Form 990 o	r 990-EZ?				🗌 Yes 🗹 No
	If "Yes," describe the	se new services on Sc	hedule O			
3	Did the organization	cease conducting, or r	nake significant	changes in how it condi	ucts, any program	
	services?					🗌 Yes 🗹 No
	If "Yes," describe the	se changes on Schedu	le O			
4	Section 501(c)(3) an		ons are required	to report the amount of	largest program services, as mea of grants and allocations to others	
4a	(Code) (Expenses \$	57,039,368	ıncludıng grants of \$	39,186,835) (Revenue \$	
	See Additional Data				39,100,033) (Revenue \$	64,507,579)
					39,100,633) (Nevenue \$	64,507,579)
4b	(Code) (Expenses \$	10,533,116	including grants of \$) (Revenue \$	
4b	(Code See Additional Data) (Expenses \$	10,533,116	ıncluding grants of \$		64,507,579) 1,516,242)
4b 4c	() (Expenses \$	10,533,116	including grants of \$ including grants of \$		
	See Additional Data) (Revenue \$	1,516,242)
	See Additional Data (Code) (Revenue \$	1,516,242)
	See Additional Data (Code See Additional Data (Code Other program service)) (Expenses \$) (Expenses \$ ces (Describe in Sched	8,700,668 6,251,444 ule O)	including grants of \$ including grants of \$) (Revenue \$) (Revenue \$) (Revenue \$	1,516,242)
4c	See Additional Data (Code See Additional Data (Code) (Expenses \$) (Expenses \$	8,700,668 6,251,444 ule O)	including grants of \$ including grants of \$) (Revenue \$) (Revenue \$	1,516,242)

	990 (2010)			Page 3
Par	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	Yes	
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?			No
7	If "Yes," complete Schedule D, Part I	6		No
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II "	7		
9	If "Yes," complete Schedule D, Part III	8		No
,	for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in 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			
	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	
	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 2	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	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
D	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 valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Yes	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	

ar <i>Sc</i> 24a Di th <i>co</i>	In 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 chedule J	23	Yes Yes	No
ar <i>Sc</i> 24a Di th <i>co</i>	Indiginal former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete chedule J		Yes	
th <i>co</i>	te last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and simplete Schedule K. If "No," go to line 25a			
h Di		24a	Yes	
D D	d the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
	d the organization maintain an escrow account other than a refunding escrow at any time during the year defease any tax-exempt bonds?	24c		No
d Di	d the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	Yes	
Dı	ection 501(c)(3), 501(c)(4), and 501(c)(29) organizations. In the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," omplete Schedule L, Part I	25a		No
th	the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and at the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? "Yes," complete Schedule L, Part I	25b		No
fo	d the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or rmer officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? "Yes," complete Schedule L, Part II	26		No
co	d the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial intributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member any of these persons? If "Yes," complete Schedule L, Part III	27		No
	as the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV structions for applicable filing thresholds, conditions, and exceptions)			
	current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,			
	art IV	28a		No
	family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,	28b		No
c Ar	n entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an ficer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29 Di	id the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🛸	29	Yes	
	d the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation ontributions? If "Yes," complete Schedule M	30		No
31 Di	d the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
	d the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? "Yes," complete Schedule N, Part II	32		No
	d the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 01 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
	as the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and art V, line 1	34	Yes	
	d the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
WI	'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity ithin the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		No
or	ection 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related ganization? If "Yes," complete Schedule R, Part V, line 2	36		No
IS	d the organization conduct more than 5% of its activities through an entity that is not a related organization and that treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
	d the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. I Form 990 filers are required to complete Schedule O	38	Yes	

Check if Schedule O contains a response or note to any line in this Part V .

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

No

Yes

111

0

1a

1b

Page 4

-	provided to the payor?		103	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		

10a

10b

11a

11b

12b

13b

13c

8

9a

9b

12a

13a

14a

14b

15

No

No

Form **990** (2018)

Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services

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

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?

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

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

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

11 Section 501(c)(12) organizations. Enter
a Gross income from members or shareholders .

Form	990 (2018)			Page 6
Pai	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	o" respo	onse to i	ines
Se	ection 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 28			
	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 27			
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		No
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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	2.)	
			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		

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
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?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
Ь	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	

_	persons other than the governing body?			
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	ection B. Policies (This Section B requests information about policies not required by the Internal Revenue	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	
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 taxable entity during the year?	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 status with respect to such arrangements?	4.51		
		16b	Yes	
	ection C. Disclosure			
	List the States with which a copy of this Form 990 is required to be filed AR , KY , MA , MD , MI , MT , NV , NH , NY		OR , W	A
10	Section 6104 requires on average to the form 1022 (or 1024 A.f. ambled b) 000 and 000 T (501/a)(2)			

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 \square Own website \square Another's website \square Upon request \square Other (explain in Schedule O)

19 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 •ROBERT YOUNG PO BOX 720 200 WEST WARD STREET SPRINGFIELD, OH 45504 (937) 327-7025 20

101111 330 (2	010)										Page /
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 current key	E), and (F) if no	compe	nsatı	on w	vas į	paid		- ,,		
• List the who received	organization's five current 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 former office compensation from the organization						pensat	ed e	employees who rece	ived more than \$10	0,000
	f the organization's former dir 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	than o	one bo oth a direct	ox, un off tor/t	t cho unles ficer rust	and a	on	(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										

1660 W 2ND STREET SUITE 1100 CLEVELAND, OH 441131448

compensation from the organization ▶ 17

Page 8
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours per week (list any hours	than c	ne b	ox, u n off	t che inles ficer	r and a	son	(D) Reportable compensation from the organization (W		compensation W- from the		ited f other sation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC	,)	organizati relati organiza	ed
See /	Additional Data Table												
											+		
											\dashv		
1h S	Sub-Total			<u> </u>	Щ		<u> </u>				\dashv		
сТ	otal from continuation sheets to Pa				·		•						
	otal (add lines 1b and 1c) Total number of individuals (including					L	▶		1,260,590	100.000	0		155,494
_	of reportable compensation from the			e iiste	eu ai	DOVE	e) who	rece	eived more than \$.100,000			
												Yes	No
3	Did the organization list any former of line 1a? <i>If "Yes," complete Schedule J</i>			ee, k	ey er	mplo •	oyee,	or hi	ghest compensate	ed employee on	3		No
4	For any individual listed on line 1a, is organization and related organizations									om the			
	ındıvıdual		• •	•	•	٠	•	•			4	Yes	
5	Did any person listed on line 1a receiv services rendered to the organization					,			_	dividual for	5		No
	ction B. Independent Contract								1 1	+400 000 6			
1	Complete this table for your five higher from the organization Report comper										mper	nsation	
	Name a	(A) ind business addre	ess						De:	(B) scription of services		(C Compen	
	BUILDING CONSTRUCTION								CONSTRU	CTION SERVICES		20,	820,277
MIAM:	NEWMARK DRIVE ISBURG, OH 45342												
	HURST DINING SERVICES								DINING S	ERVICES/CATERING		3,	186,715
PITTS	X 644091 BURGH, PA 152644091												
	A OMEGA BUILDING SERVICES INC								JANITORIA	AL SERVICES		1,	.004,346
KETTE	CULVER AVENUE RING, OH 45429												
	ONSULTANTS INC								ARCHITEC	TURAL SERVICES			849,614
YOUN	AST FEDERAL STREET GSTOWN, OH 44503									CTION CERTIFICA			206 245
ULMEI	R BERNE LLP								CONSTRU	CTION SERVICES			386,946

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Part	VIII									
		Check if Schedul	e O contains	a respo	onse or note to any	(A) Total revenue		(B)	(C) Unrelated	(D) Revenue
							f	exempt unction evenue	business revenue	excluded from tax under sections 512 - 514
s s	1	a Federated campaig	ns	1a			•			
ant		b Membership dues		1 b						
G, G		c Fundraising events		1c	27,961					
ifts ar /		d Related organizatio		1d						
s, G imil		e Government grants (co		1e	1,287,293					
tion r Si		f All other contributions and similar amounts n above		1f	6,578,406					
Contributions, Gifts, Grants and Other Similar Amounts		g Noncash contribution in lines 1a - 1f \$	ons included	4,9	990,626					
ತಿಕ		h Total. Add lines 1a	-1f		•	7,893,66	0			
ı					Business					
JI &		TUITION AND FEES				611310	34,507,579	· ·		
á		AUXILIARY ENTERPRISE				611710	.3,083,224	·		
Program Service Revenue	C	OTHER SOURCE INCOM	E			611710	1,510,242	1,510	,272	
₹	d	•								
Jran.	e	-	ruco rovonuo							
Ροğ		All other program se			79,1	07,045				
		Total. Add lines 2a-2 Investment income (i			Interest and other	1		T		
	9	sımılar amounts) .		•	•	4,452	704		647	4,452,057
		Income from investme		•	•					
	9	Royalties	(ı) Rea		(II) Personal					
	6 <i>a</i>	Gross rents								
	ŀ	b Less rental expenses								
	•	c Rental income or (loss)								
	•	d Net rental income o	r (loss)	•						
	7-	Gross amount	(ı) Securit	ies	(II) Other					
	, .	from sales of assets other	26,7	75,043	1,041,677					
		than inventory								
	ł	 Less cost or other basis and 	24,4	93,779	419,880					
	(sales expenses Gain or (loss)	2,2	81,264	621,797					
		d Net gain or (loss) .			>	2,903	061		38,211	2,864,850
a,	8 <i>a</i>	Gross income from f (not including \$	undraising evo 27,961	ents of						
Revenue		contributions reporte See Part IV, line 18	ed on line 1c)		10.254					
ě		b Less direct expense		a b	,,,,,,					
er F		c Net income or (loss)				J	174			174
Other	9ā	Gross income from g See Part IV, line 19		es						
		See Fairty, inte 19		а	1					
		Less direct expense		b]				
		c Net income or (loss) aGross sales of invent		activit	iles 🕨					
		returns and allowand			J					
		Less cost of goods s	- old	a b						
		Net income or (loss)				J				
		Miscellaneous			Business Code					
	11	LaPARTNERSHIP INCC	ME		900099	-85	094		32,258	-117,352
		_								
	t	b								
		c								
	•									
	•	d All other revenue .								
	•	e Total. Add lines 11a	-11d		•	-85	.094			
	12	2 Total revenue. See	Instructions			94,271		79,107,045	71,116	7,199,729
						5+,2/1		, 5,107,045	/1,110	Form 990 (2018)

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

18 Payments of travel or entertainment expenses for any federal, state, or local public officials19 Conferences, conventions, and meetings

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)

12 Advertising and promotion .

13 Office expenses .

20 Interest . . .

23 Insurance .

21 Payments to affiliates . . .

expenses on Schedule O)

b FOOD SERVICE EXPENSE

c BOOKS AND RECORDS

d MEMBERSHIPS

e All other expenses

a DEPARTMENTAL PROGRAMS

22 Depreciation, depletion, and amortization

15 Royalties .

17 Travel .

16 Occupancy .

14 Information technology

Form 990 (2018)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all c	olumns All other orga	nızatıons must comp	olete 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
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21		·		
2 Grants and other assistance to domestic individuals See Part IV, line 22	38,787,349	38,787,349		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16	399,486	399,486		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	551,840	463,546	60,702	27,592
6 Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7 Other salaries and wages	21,773,381	18,289,640	2,395,072	1,088,669
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	867,000	728,280	95,370	43,350
9 Other employee benefits	3,395,617	2,852,318	373,518	169,781
10 Payroll taxes	1,512,306	1,270,337	166,354	75,615
11 Fees for services (non-employees)				
a Management				
b Legal	115,005		115,005	
c Accounting	71,100		71,100	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	303,501		303,501	
a Other (If line 11g amount exceeds 10% of line 25, column	2,255,556	1.894.667	248.111	112.778

437,325

967,965

744,635

4,872,744

1,204,077

2,649,641

3,340,938

3,252,219

2,931,813

564,416

271,100

91,269,014

367,353

813,091

625,493

4,093,105

1,011,425

2,225,698

2,806,388

2,731,864

2,462,723

474,109

227,724

82,524,596

48,106

106,476

81,910

536,002

132,448

291,461

367,503

357,744

322,499

62,086

29,821

6,164,789

21,866

48,398

37,232

243,637

60,204

132,482

167,047

162,611

146,591

28,221

13,555

2,579,629

Form 990 (2018)

Form 990 (2018)

21

23

24

34

Liabilities

				(A) Beginning of year		(B) End of year
1	Cash-non-interest-bearing			6,789	1	7,572
2	Savings and temporary cash investments .		[17,909,849	2	12,886,308
3	Pledges and grants receivable, net	s receivable, net		19,118,985	3	11,878,327
4	Accounts receivable, net		[3,313,905	4	2,925,476
2 SSets 6 7 8 8 7 8	Loans and other receivables from current and for trustees, key employees, and highest compensa Part II of Schedule L	ated em . fied per n 4958(ations of (see ins	ployees Complete sons (as defined under c)(3)(B), and section 501(c)(9) tructions) Complete		5 6 7	
8 8	Inventories for sale or use				8	
⋖ 9	Prepaid expenses and deferred charges			364,602	9	332,545
10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	169,383,062			
Ь	Less accumulated depreciation	10b	113,898,845	73,797,593	10c	55.484.217

	basis Complete Part VI of Schedule D	104	100,000,002			
b	Less accumulated depreciation	10b	113,898,845	73,797,593	10 c	55,484,217
11	Investments—publicly traded securities .			77,219,184	11	76,561,975
12	Investments—other securities See Part IV, line	11 .		25,883,237	12	32,323,254
13	Investments—program-related See Part IV, line	11 .		8,307,927	13	7,899,615
14	Intangible assets				14	
15	Other assets See Part IV, line 11			9,684,417	15	9,226,968
16	Total assets.Add lines 1 through 15 (must equa	al line	34)	235,606,488	16	209,526,257
17	Accounts payable and accrued expenses			6,723,740	17	6,674,928
18	Grants payable				18	
19	Deferred revenue			2,784,640	19	2,124,564
20	Tax-exempt bond liabilities			42,451,947	20	42,528,647

21

22

23

24

34

1,401,237

6.958.648

209,526,257

Form **990** (2018)

1,585,893

11,841,101

235,606,488

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Total liabilities and net assets/fund balances

persons Complete Part II of Schedule L .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

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

	25	and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D			5,555,515
	26	Total liabilities.Add lines 17 through 25	65,387,321	26	59,688,024
ces		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.			
<u>a</u>	27	Unrestricted net assets	24,570,669	27	7,445,901
Ba	28	Temporarily restricted net assets	47,750,692	28	41,620,765
pun	29	Permanently restricted net assets	97,897,806	29	100,771,567
Ē		Organizations that do not follow SFAS 117 (ASC 958),			
s or I	30	check here ▶ ☐ and complete lines 30 through 34. Capital stock or trust principal, or current funds		30	
set	31	Paid-in or capital surplus, or land, building or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	170,219,167	33	149,838,233
Z	24	Total liabilities and not associa/fund balances	235 606 488	2/1	209 526 257

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:

Software Version: EIN: 31-0537177

Name: THE BOARD OF DIRECTORS OF

WITTENBERG COLLEGE

Form 990 (2018)

Form 990, Part III, Line 4a:

WITTENBERG UNIVERSITY CURRENTLY ENROLLS APPROXIMATELY 1,800 FULL-TIME STUDENTS WHO PURSUE DEGREES IN MORE THAN 34 MAJOR FIELDS OF STUDY THE UNIVERSITY HOLDS GENERAL ACCREDITATION FROM THE NORTH CENTRAL ASSOCIATION OF COLLEGES AND SCHOOLS AND SOME DEPARTMENTS HOLD SPECIALTY ACCREDITATIONS EFFECTIVE DECEMBER 1, 2000, THE OHIO BOARD OF REGENTS GRANTED THE UNIVERSITY AN AMENDED CERTIFICATE OF AUTHORIZATION TO CONFER THE DEGREES OF BACHELOR OF ARTS, BACHELOR OF FINE ARTS, BACHELOR OF MUSIC, BACHELOR OF MUSIC EDUCATION, AND MASTER OF ARTS IN EDUCATION THE REGENTS ALSO APPROVED THE UNIVERSITY IN THE FOLLOWING TEACHER LICENSURE FIELDS EARLY CHILDHOOD, MIDDLE CHILDHOOD.

INTERVENTION SPECIALIST MILD/MODERATE EDUCATIONAL NEEDS, ADOLESCENT TO YOUNG ADULT EARTH SCIENCES, INTEGRATED LANGUAGE ARTS, INTEGRATED

MATHEMATICS, INTEGRATED SOCIAL STUDIES, AND LIFE SCIENCES, MULTI-AGE DRAMA/THEATER, FOREIGN LANGUAGE, MUSIC AND VISUAL ARTS

Form 990, Part III, Line 4b: STUDENTS AT WITTENBERG HAVE THE OPPORTUNITY TO PARTICIPATE IN APPROXIMATELY 100 CO-CURRICULAR ORGANIZATIONS WITH MULTIPLE LEADERSHIP. OPPORTUNITIES STUDENT ORGANIZATIONS ARE SOME OF THE MOST ACTIVE AND IMPACTFUL GROUPS ON CAMPUS WITTENBERG OFFERS A BROAD-BASED INTERCOLLEGIATE ATHLETICS PROGRAM NOW OFFERING 24 VARSITY TEAMS - 12 FOR MEN AND 12 FOR WOMEN - IN ADDITION TO NUMEROUS CLUB AND INTRAMURAL

OPPORTUNITIES THERE IS SOMETHING TO MEET EVERY STUDENT'S ATHLETIC AND RECREATIONAL NEEDS

WITTENBERG IS A RESIDENTIAL CAMPUS WITH APPROXIMATELY 90% OF THE STUDENTS RESIDING ON CAMPUS OR IN THE UNIVERSITY DISTRICT NEIGHBORHOOD IN CLOSE PROXIMITY TO THE CAMPUS STUDENTS MAY CHOOSE TO LIVE IN ONE OF 7 DISTINCT RESIDENCE HALLS WITTENBERG OFFERS A WIDE SELECTION OF HOUSES. AND APARTMENTS FOR JUNIORS AND SENIORS SEVERAL DINING LOCATIONS ARE AVAILABLE ON CAMPUS. AND THE STUDENT CENTER HOUSES A BOOKSTORE, CAMPUS MAILROOM, GAME ROOM, LOUNGES, AND OTHER AMENITIES

Form 990, Part III, Line 4c:

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

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

	any nours	i and	a dir	ecto	אר/ נרי	rustee)	/ /	organization	organizations	from the	
	for related organizations below dotted line)		lostitutional Trustee	101	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
DR MICHAEL L FRANDSEN PRESIDENT	40 00			x				319,235	0	56,819	
THE REVEREND JONATHAN L EILERT BOARD CHAIR	1 00	×		x				0	0	0	
WILLIAM D EDWARDS BOARD VICE CHAIR	1 00			х				0	0	0	
R ANDREW BELL	1 00	×		х				0	0	0	

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BOARD CHAIR
WILLIAM D EDWARDS
BOARD VICE CHAIR
R ANDREW BELL
BOARD TREASURER

......

ALICIA SWEET HUPP

BOARD SECRETARY

ROY K ALLEN

BOARD MEMBER

DAVID E BAINES

BOARD MEMBER

BOARD MEMBER

BOARD MEMBER

WENDY G FORD

BOARD MEMBER (BEG 7/18)

WILLIAM S BOGGS

WES C BATES

......

and Independent Contractors

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

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

	any nours	i and	a dir	ecto	r/tr'ر	rustee)	, !	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
JAMES J HENSON BOARD MEMBER	1 00	×						0	0	0	
THE HONORABLE JANET E JACKSON BOARD MEMBER	1 00	1 1						0	0	0	
DR JAMES J LAKSO BOARD MEMBER (BEG 10/18)	1 00	×						0	0	0	
DR WENDELL R LUTZ	1 00	1 1						0	0	0	

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DR JAMES J LAKSO
BOARD MEMBER (BEG 10/18)
DR WENDELL R LUTZ
BOARD MEMBER
SARAH HAGEN MCWILLIAMS

......

BOARD MEMBER

BOARD MEMBER

BOARD MEMBER

ROBERT E NESS

BOARD MEMBER

ERIC C RUSNAK

BOARD MEMBER

STEPHEN M NEELY

ROBERT G MERZWEILER

FREDERICK B MITCHELL

BOARD MEMBER (BEG 7/18)

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)

organization

0

126,912

183,157

organizations

from the

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12,022

21,253

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any hours

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

	1 6,	1	ua a a ooto., t. aotoo,			′ !	(11) 2 (1000	(14) 2/4 000		
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
THE REV CATHERINE L SCHIBLER-KEEGAN BOARD MEMBER	1 00	×						0	0	0
LEWIS W SHAW II BOARD MEMBER	1 00	1 1						0	0	0
DR ALAN D STEWART BOARD MEMBER	1 00	1 1						0	0	0
RONALD M SZUCH BOARD MEMBER	1 00	1 1						0	0	0

MARTIN J UHLE BOARD MEMBER

JAMES S WADE

BOARD MEMBER

BOARD MEMBER

JAMES R WYMER

BOARD MEMBER

ROBERT YOUNG

MARY JO ZEMBER

INTERIM PROVOST

SCOTT H MUDDY WATTERS

.......

VP FINANCE & ASST TREASURER

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 hours per compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the

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

and Independent Contractors

VP FOR UNIVERSITY ADVANCEMENT

	ally flours	and a director/trustee;						Organization	organizations	i i o i i ci i e	
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
CHARLIE MCFARLAND ASSISTANT VP FOR FINANCE ADMIN	40 00					×		112,563	0	14,742	
ELIZABETH SORENSEN DIRECTOR OF NURSING	40 00					х		119,858	0	15,835	
IAMES DECSEY	40 00										

27,580

7,243

DIRECTOR OF NORSING							
JAMES BECSEY	40 00			×	125.224	0	
DIRECTOR OF PHYSICAL PLANT				,	123,221)	
JOHN HILLE	40 00						

JAMES BECSEY	40 00	l		v	125,224	0	
DIRECTOR OF PHYSICAL PLANT				^	125,224	0	
JOHN HILLE	40 00						

112,000

VP OF ENROLLMENT MANAGEMENT

......

40 00

WENDY KOBLER

Х

161,641

efile	e GRA	APHIC pri	nt - DO NOT	PROCESS	As Filed Data -	DLN: 9	DLN: 93493139008700				
SCH		ULE A		Public (Charity Statu	e and Dul	alic Sunn	ort	OMB No 1545-0047		
	m 990		Comp	plete if the o	ganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) c empt charitable 990 or Form 99	organization or trust. 0-EZ	r a section	2018		
•		the Treasury		► Go to	•	Open to Public Inspection					
Name	e of th	ne organiza OF DIRECTORS						Employer identific	ation number		
WITTE	NBERG	COLLEGE						31-0537177			
	rganiz				is (All organization it is (For lines 1 thro			See instructions.			
1			•		sociation of churches	•		(A)(i).			
2	✓	A school de									
3						,					
4		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state									
5		(b)(1)(A)	(iv). (Complet	e Part II)	t of a college or unive				bed in section 170		
6		A federal, s	tate, or local <u>c</u>	government or	governmental unit de	escribed in sectio	on 170(b)(1)(A	\)(v).			
7				nally receives : vi). (Complete	a substantıal part of ıt Part II)	s support from a	governmental u	ınıt or from the gener	al public described in		
8		A communi	ty trust descri	bed in section	170(b)(1)(A)(vi)	(Complete Part I	I)				
9					scribed in 170(b)(1) ee instructions Enter				ege or university or a		
10		An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)									
11		An organiza	ation organized	d and operated	exclusively to test fo	r public safety S	ee section 509	(a)(4).			
12		more public	ly supported o	organizations d	exclusively for the be lescribed in section 5 the type of supporting	09(a)(1) or sec	ction 509(a)(2). See section 509(a			
a		organizatio	n(s) the power		ated, supervised, or coppoint or elect a majo						
b		manageme	nt of the supp		ervised or controlled into the sare and C.						
c		Type III f	unctionally in	, ntegrated. A s	supporting organizatio				ated with, its		
d		Type III n	on-functiona integrated Ti	i lly integrate he organization	d. A supporting organ n generally must satis t IV, Sections A and	Ization operated fy a distribution i	ın connection wi requirement and	th its supported orgai	1. 1.		
e		Check this	box if the orga	anızatıon receiv	ed a written determir	nation from the II		pe I, Type II, Type II	I functionally		
f	Enter		of type III no of supported		integrated supporting	organization					
g					pported organization(T'					
	organization organization in your governing document? monet							(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
						Yes	No				
Total			+						 		
		vork Reduc	tion Act Notic	ce, see the Ir	structions for	Cat No 11285	F :	Schedule A (Form 9	90 or 990-EZ) 2018		

instructions

rage	_
170	

oport Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170
(1)(A)(ix)
mplete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part
If the organization fails to qualify under the tests listed below, please complete Part III.)

	III. If the organization fai						iy under Part
_	Section A. Public Support	iis to quality ut	ider the tests his	ted below, pied.	se complete rai	C 111.)	
	Calendar year		I	T	T		
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grant ")						
2	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
5	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from						
	line 4						
S	Section B. Total Support						
	Calendar year	(a)2014	(b) 2015	(c)2016	(d)2017	(e)2018	(f)Total
	(or fiscal year beginning in) ▶	(-,	(=,====	(3,2323	(-)	(0)2020	(1).010.
7							
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
_	income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the business is regularly carried on						
10							
10	loss from the sale of capital assets						
	(Explain in Part VI)						
11	Total support. Add lines 7 through						
	10						
12	Gross receipts from related activities, e	tc (see instruction	ons)			12	
13	First five years. If the Form 990 is for	the organization	s first, second, th	urd, fourth, or fifth	n tax vear as a sec	tion 501(c)(3) org	anization.
	check this box and stop here	=				· · · · · · <u>-</u>	_
_	section C. Computation of Public						_
	Public support percentage for 2018 (line			column (f))			
				column (1))		14	
	Public support percentage for 2017 Sch					15	
16 a	33 1/3% support test—2018. If the				ne 14 is 33 1/3% o	r more, check this	box
	and stop here. The organization qualif						··►□
Ŀ	33 1/3% support test—2017. If the	organization did	not check a box o	on line 13 or 16a,	and line 15 is 33 i	1/3% or more, chec	k this
	box and stop here. The organization	qualifies as a pub	olicly supported or	ganızatıon			▶□
17 a	10%-facts-and-circumstances test-	–2018. If the or	ganization did not	check a box on lir	ne 13, 16a, or 16b	, and line 14	
	is 10% or more, and if the organization						
	in Part VI how the organization meets t						
	organization						▶ □
Į.	10%-facts-and-circumstances test	-2017. If the o	rganization did no	ticheck a box on li	ine 13, 16a, 16b	or 17a, and line	
0	15 is 10% or more, and if the organiza						
	Explain in Part VI how the organization						
	· -					F	▶ □
	supported organization Private foundation If the organization	n did not chack :	hov on line 12 1	63 16h 17a 6-1	7h check this has	and see	
TΩ	Private foundation. If the organization	ii ala not check a	a DOV OH HHE TO, T	oa, iou, i/a, oi i	. / D, CHECK CHS DO)	v alla see	

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		43.5045		413.004-		(0) =
	(or fiscal year beginning in) ▶	(a) 2014	(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	I	1		1
	(or fiscal year beginning in) ▶	(a) 2014	(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	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for	r the organization	ı 's fırst, second, tl	nird, fourth, or fift	:h tax vear as a se	ction 501(c)(3) c	rganization.
	check this box and stop here	,	, ,	, ,	,	(), ()	• □
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	
17	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 33 1/3% support tests—2017. If the						
b	· · · · · · · · · · · · · · · · · · ·	-			•		_
	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	Page 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	11 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 Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	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 Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2				
	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 Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1				
	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			
		1				
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)					
		2				
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's 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 instruct	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	mstru	ctions)			
2	Activities Test Answer (a) and (b) below.		Yes	No		
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	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 Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement					
,		2b				
3	Parent of Supported Organizations Answer (a) and (b) below.	2~				
	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? <i>Provide details in Part VI</i> .	3a				
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	36				

Sched	ule A (Form 990 or 990-EZ) 2018			Page 6
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	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	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	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		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	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	Distributable Amount. 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

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

See instructions

6 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

7 Excess distributions carryover to 2019. Add lines 31 and 4c

8 Breakdown of line 7 a Excess from 2014.

b Excess from 2015. c Excess from 2016.

d Excess from 2017. e Excess from 2018.

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

Additional Data

Software ID: Software Version:

EIN: 31-0537177

Name: THE BOARD OF DIRECTORS OF WITTENBERG COLLEGE

Part VI
Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See Instructions)

Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions)
Facts And Circumstances Test

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Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

31-0537177

DLN: 93493139008700

OMB No 1545-0047

Open to Public

separate political organization If none, enter -0-

Internal Revenue Service

THE BOARD OF DIRECTORS OF WITTENBERG COLLEGE

Part I-A

EZ)

SCHEDULE C (Form 990 or 990-

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. Department of the Treasury ▶Go to www.irs.gov/Form990 for instructions and the latest information. Inspection If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B • Section 527 organizations Complete Part I-A only If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number**

Complete if the organization is exempt under section 501(c) or is a section 527 organization.

Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes Was a correction made? 4a ☐ Yes □ No If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a

or Paperwork Reduction Act Notice, see t	the instructions for Form 990 or 990-EZ.	Cat	No 500845 Schedule C (Form 990 or 990-EZ) 2018
5				
5				
1				
3				
2				
1				

Calendar year (or fiscal year (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) Total beginning in) 2a Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e)) Grassroots lobbying expenditures Schedule C (Form 990 or 990-EZ) 2018 Media advertisements?

Other activities?

Total Add lines 1c through 1i

(b)

Amount

Form 5768 (election under section 501(h)). (a) Yes

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

No

1

c

2a

3

Part III-B

During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers?

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

Nο Nο Νo

Nο

Nο

Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?

Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

Nο Nο Nο Nο Yes

3,554

3,554

b If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? 501(c)(6).

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-A Were substantially all (90% or more) dues received nondeductible by members? 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?

Did the organization agree to carry over lobbying and political expenditures from the prior year?

Yes No

1

2

answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is 1

expenses for which the section 527(f) tax was paid). 2a Current year b Carryover from last year 2b C 2c

3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4

5 Taxable amount of lobbying and political expenditures (see instructions) Part IV **Supplemental Information**

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference Explanation PART II-B, LINE 1 THE ORGANIZATION PAYS MEMBERSHIP DUES TO ORGANIZATIONS, SUCH AS NACUBO, WHICH MAY

ENGAGE IN LOBBYING ACTIVITIES THEREFORE, A PORTION OF THE DUES MAY BE ATTRIBUTABLE TO LOBBYING ACTIVITIES, THIS AMOUNT, HOWEVER, IS IMMATERIAL THE ORGANIZATION DOES NOT DIRECTLY PARTICIPATE IN LOBBYING ACTIVITIES Schedule C (Form 990 or 990EZ) 2018

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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: 93493139008700 OMB No 1545-0047

Inspection

Internal Revenue Service

(Form 990)

Department of the Treasury ▶ Go to www.irs.gov/Form990 for the latest information. Name of the organization **Employer identification number** THE BOARD OF DIRECTORS OF WITTENBERG COLLEGE 31-0537177 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 1 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

Par	1111	Organizations M	aintaining Coll	lections of	Art, His	storie	cal Tı	reası	ıres, o	r Other	Similar A	\ssets (contir	nued)	
3		g the organization's acq s (check all that apply)	juisition, accession	n, and other r	records, ch	neck a	any of	the fo	llowing 1	that are a	sıgnıfıcant	use of it	s colle	ection	
а		Public exhibition				d		Loan	or exch	ange prog	ırams				
b		Scholarly research				е		Othe	r						
c		Preservation for future	e generations												
4	Provid Part >	de a description of the XIII	organization's coll	ections and e	explain ho	w the	y furth	ner the	e organi:	zation's ex	kempt purp	ose in			
5		ng the year, did the org is to be sold to raise fur									ıılar	□ Ye	26	□ N	n
Pai	rt IV	Escrow and Cust Complete if the or			on Form	990,	, Part	IV, lı	ne 9, o	r reporte	ed an amo				
		X, line 21.													
1a		e organization an agent ded on Form 990, Part :		an or other in	itermediar	y for	contril	bution	is or oth	er assets i	not	□ Ye	es	□ N	0
															_
b		es," explain the arrange	ement in Part XIII	and complet	e the follo	wing	table					Amount			_
C	_	nning balance								1c					_
d		ions during the year								1d					_
e		butions during the year	r							1e					_
f	Endın	ng balance								1f					_
2a	Did th	he organization include	an amount on Fo	rm 990, Part	X, line 21	, for e	escrow	or cu	istodial a	account lia	bility?	. 🗆 Ye	es	□ N	0
b	If "Ye	es," explain the arrange	ement in Part XIII	Check here	ıf the expl	anatio	on has	been	provide	d in Part)	KIII	. 🗆			
Pa	rt V	Endowment Fun	ds. Complete if	the organiz	zation ans	swer	ed "Ye	es" or	n Form	990, Par	t IV, line	10.			
				(a)Current			ior yea				(d)Three ye		(e) Fo	our year	s back
1 a	Beginn	ning of year balance .		113,0	57,008	1	103,723	3,532	9	96,135,296	99	9,911,124		96,7	737,383
b	Contrib	outions		2,5	520,584		6,597	7,470		4,554,757	:	3,882,401		3,6	581,454
С	Net inv	vestment earnings, gair	ns, and losses	5,6	529,827		7,477	7,660		8,082,019	-:	1,143,282		4,2	226,374
		or scholarships		2,4	108,725		2,432	2,691		2,348,013		2,140,821		1,9	925,521
		expenditures for facilitie													
		ograms		2,6	526,867		2,308	3,963		2,700,527	4	1,374,126		2,8	308,566
f	Admını	istrative expenses .													
g	End of	year balance		116,1	171,827	1	13,057	7,008	10	03,723,532	96	5,135,296		99,9	911,124
2	Provid	de the estimated perce	ntage of the curre	nt year end	balance (lı	ne 1a	ı, coluı	mn (a)) held a	15		<u>u</u>			
а	Board	d designated or quasi-e	endowment 🕨	7 810 %	•	_		•							
b	Perm	anent endowment ▶	92 190 %												
•	Temp	porarily restricted endov		%											
·		percentages on lines 2a			2/6										
За		here endowment funds		•		n that	are h	eld an	ıd admın	ıstered foı	r the				
		nization by	,		J								Ī	Yes	No
	(i) ur	nrelated organizations										3	a(i)		No
		elated organizations .										3	a(ii)		No
b		es" on 3a(11), are the re	-		•			?.					3b		
4	Descr	ribe in Part XIII the inte	ended uses of the	organization	's endowm	nent f	unds								
Pai	rt VI	Land, Buildings,								_					
		Complete if the or			on Form (b) Cost or										
	Descri	iption of property	(a) Cost or oth (investme	I .	(D) COSE OF	outer	nasis (outer)	(C) ACC	.umuiated 0	lepreciation		(u) bo	ok value	=
1a	Land							31,732							,881,732
b	Buildin	gs					124,03	30,941			81,466,327			42	,564,614
c	Leaseh	nold improvements													
d	Equipm	nent					39,56	54,690			32,432,518			7	,132,172
е	Other						90	05,699							905,699

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

55,484,217

Part VII		ne org	ganızatıon ansv	vered "Yes" on F	orm 990, Part IV, I	ine 11b.
	See Form 990, Part X, line 12. (a) Description of security or category	(b) Book value		c) Method of valuation	
(4) 5	(including name of security)			Cost	or end-of-year market	value
	held equity interests					
(3) Other (A) ALTERNA	ATIVE INVESTMENTS		32,323,254		F	
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
	n (b) must equal Form 990, Part X, col (B) line 12)		22 222 254			
Part VIII	Investments—Program Related.		32,323,254			
	Complete if the organization answered 'Yes' on F (a) Description of investment	orm	990, Part IV, li		m 990, Part X, line c) Method of valuation	
	(a) bescription of investment		(b) Book value		or end-of-year market	
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	n (b) must equal Form 990, Part X, col (B) line 13)					
Part IX	Other Assets. Complete if the organization answered	'Yes'	on Form 990, Pa	l art IV, line 11d Se	e Form 990, Part X, lı	ne 15
(1)	(a) Description	1			(t	o) Book value
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Colu	mn (b) must equal Form 990, Part X, col (B) line 15)				•	
Part X	Other Liabilities. Complete if the organization a See Form 990, Part X, line 25.	nswe	ered 'Yes' on Fo	orm 990, Part IV	, line 11e or 11f.	
1.	(a) Description of liability		(b) B	ook value		
(1) Federal I	ncome taxes HELD ON BEHALF OF OTHERS			373,077		
	AND TRUSTS PAYABLE			2,230,664		
	OVERNMENT LOANS & GRANTS			4,354,907		
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 25)		<u> </u>	6,958,648		
2. Liability fo	or uncertain tax positions In Part XIII, provide the text of		ootnote to the o	ganization's financ		•
organization	's liability for uncertain tax positions under FIN 48 (ASC 7	⁴⁰) (Cneck here if the	text of the footno	te has been provided	ın Part XIII 🗹

Part XI

2

3

1

2

c

d

3

4

b

5

Part XIII

See Additional Data Table

Return Reference

Schedule D (Form 990) 2018

Page 4

-386,854

54,343,456

39,928,094

94,271,550

52,022,095

243,417

51,778,678

а Net unrealized gains (losses) on investments b c d e

4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 b Add lines **4a** and **4b** c

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

Investment expenses not included on Form 990, Part VIII, line 7b .

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

5 Part XII

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

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 . .

Donated services and use of facilities . . .

Other (Describe in Part XIII)

Add lines 2a through 2d

Supplemental Information

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

4a 4b

> 2a 2b

2c

2d

4a

4b

Explanation

2a

2b

2c

2d

39.928.094

4c

243,417

303,501

39.186.835

-579.142

192,288

5

2e

3

5

2e

3

39,490,336 91.269.014

Schedule D (Form 990) 2018

4c 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	Page 5
Part XIII Supplemental Info	mation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

Software ID:

Software Version: EIN: 31-0537177

Name: THE BOARD OF DIRECTORS OF

WITTENBERG COLLEGE

Supplemental Information

Return Reference	Explanation
PART V, LINE 4	THE UNIVERSITY'S ENDOWMENT CONSISTS OF VARIOUS INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES THE ENDOWMENT INCLUDES BOTH DONOR-RESTRICTED ENDOWMENT FUNDS AND FUNDS DESIGN ATED BY THE GOVERNING BODY TO FUNCTION AS ENDOWMENTS (BOARD-DESIGNATED ENDOWMENT FUNDS) A S REQUIRED BY ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA (GA AP), NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS, INCLUDING BOARD-DESIGNATED ENDOWMENT FUND S, ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICT IONS THE UNIVERSITY HAS A POLICY (THE SPENDING POLICY) OF APPROPRIATING FOR EXPENDITURE E ACH YEAR AS A PERCENTAGE OF ITS ENDOWMENT FUND'S AVERAGE FAIR VALUE OVER THE TWELVE QUARTE RS ENDING DECEMBER 31ST OF THE PRIOR CALENDAR YEAR THE COMMITTEE SEEKS TO REDUCE THIS SPE NDING RATE TO 5% OVER THE FIVE-YEAR PERIOD FROM FISCAL YEAR 2018 TO FISCAL YEAR 2022 THE POLICY ALLOWS FOR APPROPRIATIONS IN EXCESS OF 5 5% BASED UPON APPROVAL BY THE BOARD OF DIR ECTORS IN ESTABLISHING THIS POLICY, THE UNIVERSITY CONSIDERED THE LONG TERM EXPECTED RETU RN ON ITS ENDOWMENT ACCORDINGLY, OVER THE LONG-TERM, THE UNIVERSITY EXPECTS THE CURRENT S PENDING POLICY TO ALLOW ITS ENDOWMENT TO GROW AT AN ACCEPTABLE LEVEL THIS IS CONSISTENT W ITH THE UNIVERSITY'S OBJECTIVE TO MAINTAIN THE PURCHASING POWER OF ENDOWMENT ASSETS HELD I N PERPETUITY OR FOR A SPECIFIED TERM, AS WELL AS TO PROVIDE ADDITIONAL REAL GROWTH THROUGH NEW GIFTS AND INVESTMENT RETURN

Return Reference	Explanation
Return Reference	Expension
PART X, LINE 2	FROM THE AUDITED FINANCIAL STATEMENTS FOR THE YEAR ENDED JUNE 30, 2019 THE UNIVERSITY IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(A) OF THE U S INTERNAL REVENUE CODE, AND BY A SIMILAR PROVISION OF STATE LAW THE UNIVERSITY IS SUBJECT TO FEDERAL INCOME TAX ON ANY UNR ELATED BUSINESS TAXABLE INCOME THE UNIVERSITY'S TAX YEARS STILL SUBJECT TO EXAMINATION BY TAXING AUTHORITIES ARE YEARS SUBSEQUENT TO 2015 THE UNIVERSITY COMPLETED AN ANALYSIS OF THE TAXABLE FOR

ITS TAX POSITION, IN ACCORDANCE WITH ACCOUNTING STANDARDS CODIFICATION (ASC) 740, INCOME T AXES, AND DETERMINED THAT NO AMOUNTS WERE REQUIRED TO BE RECOGNIZED IN THE FINANCIAL STATE

MENTS AS OF JUNE 30, 2019 AND 2018

Supplemental Information

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS 192,288

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Supplemental Information	
Return Reference	Explanation
•	SCHOLARSHIPS AND AID NETTED AGAINST REVENUE ON FINANCIAL STATEMENTS 39,186,835 PARTNERSHI P INCOME FROM K-1S NOT INCLUDED ON FINANCIAL STATEMENTS 984,676 LOSS ON SALE OF PROPERTY -243,417

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Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	LOSS ON SALE OF PROPERTY 243,417

upplemental Information						
Return Reference	Explanation					
PART XII, LINE 4B - OTHER ADJUSTMENTS	SCHOLARSHIPS AND AID NETTED AGAINST REVENUE ON FINANCIAL STATEMENTS 39,186,835					

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efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493139008700 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** THE BOARD OF DIRECTORS OF WITTENBERG COLLEGE 31-0537177 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 Νo 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)

chedule E (Form 990 or 990EZ) (2018) Page 2						
Part II 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	WITTENBERG IS COMMITTED TO ENSURING A DIVERSE ENVIRONMENT FOR ALL INDIVIDUALS AS SUCH, WE INCORPORATE THIS COMMITMENT ON SEARCH MATERIALS, THE WEBSITE, RECRUITMENT PUBLICATIONS, AND STUDENT, FACULTY, STAFF HANDBOOKS, AMONG OTHER COMMUNICATIONS BOTH INTERNALLY AND EXTERNALLY					
SCHEDULE E, PART I, LINE 6	WITTENBERG UNIVERSITY RECEIVES FINANCIAL ASSISTANCE FROM THE U S GOVERNMENT IN CONNECTION WITH THE PELL GRANT AND SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT PROGRAMS WITTENBERG UNIVERSITY ALSO RECEIVES SUPPORT FROM THE STATES OF OHIO AND PENNSYLVANIA FOR CERTAIN PROGRAMS					

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

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493139008700 OMB No 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2018 ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. **Open to Public** ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Department of the Treasury Inspection Internal Revenue Service **Employer identification number** Name of the organization THE BOARD OF DIRECTORS OF WITTENBERG COLLEGE 31-0537177 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and 1 other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the region (by type) (e.g., program service, describe for and investments employees, agents, fundraising, program and independent specific type of in region region contractors in services, investments, grants service(s) in region to recipients located in the region region) See Add'l Data 2,735,612 3a Sub-total 413,616 b Total from continuation sheets to Part I n 3,149,228 c Totals (add lines 3a and 3b) Cat No 50082W For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule F (Form 990) 2018

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
, ,, ,	,	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	□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	✓ 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)	☑ 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	□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)	✓ 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	☑ No

Schedule F	(Form 990) 2018	Page :			
Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting met amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provany additional information (see instructions).					
	ReturnReference	Explanation			

Schedule F (Form 990) 2018

Additional Data

CAMBODIA,

EUROPE (INCLUDING ICELAND

& GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM

Software ID: Software Version:

EIN: 31-0537177

Name: THE BOARD OF DIRECTORS OF

WITTENBERG COLLEGE

EDUCATION

91,300

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	describe specific type of service(s) in region	(f) Total expenditures for region
EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA,			SCHOLARSHIPS	EDUCATION	129,186

SCHOLARSHIPS

Form 990 Schedule F Part I - Activities Outside The United States (b) Number of (c) Number of (d) Activities conducted (a) Region (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) SCHOLARSHIPS **IEDUCATION** 65.000 NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES SOUTH AMERICA -ISCHOLARSHIPS **IEDUCATION** 28,000 ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,

Form 990 Schedule F Part I - Activities Outside The United States							
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region		
SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,			SCHOLARSHIPS	EDUCATION	32,000		
CENTRAL AMERICA & THE CARRIBEAN			SCHOLARSHIPS	EDUCATION	24,000		

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 describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) CENTRAL AMERICA & THE INVESTMENTS 2.365.343 CARRIBEAN **IEDUCATION** 783 SOUTH ASIA IPROGRAM SERVICES

Form 990 Schedule F Part I - Activities Outside The United States (b) Number of (c) Number of (d) Activities conducted (a) Region (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) PROGRAM SERVICES **IEDUCATION** 1.819 EAST ASIA AND THE PACIFIC -AUSTRALIA, BRUNEI, BURMA, CAMBODIA. EUROPE (INCLUDING ICELAND PROGRAM SERVICES IEDUCATION 257,478 & GREENLAND) - ALBANIA. ANDORRA, AUSTRIA, BELGIUM

Form 990 Schedule F Part I - Activities Outside The United States (b) Number of (c) Number of (d) Activities conducted (a) Region (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) PROGRAM SERVICES IEDUCATION. 89.514 SUB-SAHARAN AFRICA -ANGOLA, BENIN, BOTSWANA, BURKINA FASO. NORTH AMERICA - CANADA PROGRAM SERVICES IEDUCATION 34,805 AND MEXICO, BUT NOT THE UNITED STATES

orm 990 Schedule F Part I - Activities Outside The United States							
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region		
RUSSIA AND NEIGHBORING STATES			SCHOLARSHIPS	EDUCATION	30,000		

R

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 (f) Amount of (a) Description of (h) Method of cash grant cash disbursement valuation (book. assistance Ωf non-cash non-cash recipients FMV, appraisal, assistance assistance other) 4 129.186 PAID TO SCHOLARSHIPS EAST ASIA AND UNIVERSITY ON THE PACIFIC -STUDENTS' BEHALF AUSTRALIA, BRUNEI, BURMA, CAMBODIA, 91,300 PAID TO SCHOLARSHIPS EUROPE IUNIVERSITY ON (INCLUDING STUDENTS' BEHALF ICELAND & GREENLAND) -ALBANIA, ANDORRA, AUSTRIA,

BELGIU

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S										
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)			
	NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	2	,	PAID TO UNIVERSITY ON STUDENTS' BEHALF						
	SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,	1	,	PAID TO UNIVERSITY ON STUDENTS' BEHALF						

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (e) Manner of (f) Amount of (h) Method of (d) Amount of (a) Description of assistance cash grant cash disbursement non-cash non-cash valuation (book, FMV, appraisal, recipients assistance assistance other) SCHOLARSHIPS 32,000 PAID TO ISUB-SAHARAN UNIVERSITY ON IAFRICA -STUDENTS' BEHALF ANGOLA, BENIN, IBOTSWANA. BURKINA FASO, SCHOLARSHIPS 24,000 PAID TO CENTRAL IUNIVERSITY ON AMERICA & THE STUDENTS' BEHALF CARRIBEAN

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (c)Number (a) Description of (h) Method of (b) Region (d) Amount (e) Manner of (f) Amount of assistance of cash grant cash non-cash non-cash valuation (book, recipients disbursement assistance assistance FMV, appraisal, other) SCHOLARSHIPS 30,000 PAID TO IRUSSIA AND **JUNIVERSITY ON** NEIGHBORING ISTUDENTS' BEHALF ISTATES

SCHEDULE G Supplemental Information Regarding

DLN: 93493139008700

OMB No 1545-0047

2018

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

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

Open to Public Inspection

	ne of the organization BOARD OF DIRECTORS OF						Employer ide	ntification number		
	TENBERG COLLEGE						31-0537177			
Pa	Fundraising Activ	•	_		answered "Yes" on Fo part.	rm 990,	Part IV, line 1	7.		
1	Indicate whether the organiza	ation raised funds thro	ough any	of the fo	ollowing activities Check	all that a	pply			
а	✓ Mail solicitations e ☐ Solicitation of non-government grants									
b	☑ Internet and email solicit	ernment (grants							
c	Phone solicitations			g	Special fundraising	events				
d	☐ In-person solicitations									
2a	Did the organization have a vor key employees listed in Fo							es 🗆 No		
b	If "Yes," list the ten highest p to be compensated at least \$			idraisers)	pursuant to agreements	under wh	nich the fundrais	er is		
(i)	Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai custo cont	Did ser have ody or crol of outions?	(iv) Gross receipts from activity	(or r fundra	nount paid to etained by) aiser listed in col (i)	(vi) Amount paid to (or retained by) organization		
	RUFFALO NOEL LEVITZ LLC PO BOX 718 DES MOINES, IA 503030718	STRATEGIC DEVELOPMENT AND DELIVERY OF SOLICITATIONS	Yes	No No	0		116,256	-116,256		
	al			>			116,256	-116,256		
	List all states in which the orga licensing	nızatıon ıs registered	or licens	ed to soli	cit contributions or has b	een notifi	·	<u> </u>		

che	dule G (Form 990 or 990-EZ) 2018					F	Page 3
.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 pers	son who prepares the orga	inization's gaming/special events books and r	ecords			
	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 re amount of gaming revenue retained by		ganization 🕨 \$ and th	ne			
С	If "Yes," enter name and address of the	e third party					
	Name ►						
	Address ▶						
6	Gaming manager information						
	Name ►						
	Gaming manager compensation ▶ \$						
	Description of services provided ▶						
	☐ Director/officer	☐ Employee	☐ Independent contractor				
7	Mandatory distributions						
а	Is the organization required under state retain the state gaming license?	e law to make charitable d	istributions from the gaming proceeds to		Yes	□No	
b	Enter the amount of distributions requirements in the organization's own exempt activities.		uted to other exempt organizations or spent \$		53		
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: 93493139008700 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 THE BOARD OF DIRECTORS OF 31-0537177 WITTENBERG COLLEGE 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

Return Reference PART I, LINE 2

Explanation

PLUS THE THREE YEARS PRIOR

(2) (3) (4) (5)

(6) (7) Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

> ADHERES STRICTLY TO ALL FEDERAL AND STATE REGULATIONS AND IS SUBJECT TO THE COMPLIANCE AND INTERNAL CONTROL REOUIREMENTS OF OMB-A133. IN WHICH THEY FOLLOW ALL APPLICABLE GUIDELINES. THE FINANCIAL AID OFFICE AWARDS GRANTS AND OTHER FORMS OF FINANCIAL ASSISTANCE TO STUDENTS. BASED ON REVIEW OF SELECT DATA AND ACCORDING TO A SPECIFIED METHODOLOGY DATA USED IS MAINTAINED IN EITHER PHYSICAL OR ELECTRONIC FORMAT UNTIL NO LONGER REOUIRED BY RECORD RETENTION GUIDELINES GENERALLY. ALL RECORDS ARE MAINTAINED FOR THE MOST RECENT FISAP REPORTING YEAR.

> PROCEDURES FOR MONITORING USE OF GRANT FUNDS IN THE UNITED STATES. THE ORGANIZATION USES STUDENT FINANCIAL AID GUIDELINES TO MONITOR THE USE OF GRANT FUNDS. WITTENBERG UNIVERSITY ONLY AWARDS INSTITUTIONAL AND PRIVATELY FUNDED FINANCIAL AID AWARD AS ASSISTANCE FOR STUDENTS BASED ON A CASE-BY-CASE BASIS, BASED ON MERIT, NEED, AND EXTRACURRICULAR ACTIVITIES IN DOING SO, THE UNIVERSITY'S FINANCIAL AID DEPARTMENT

> > Schedule I (Form 990) 2018

Page **2**

efil	e GRAPHIC pr	int - DO NOT PROCESS As F	iled Dat	a -	DLN: 934	9313	39008	700
Sch	edule J	Comp	ensati	ion Information	OM	IB No	1545-0	0047
(Form 990)		For certain Officers, Di	irectors, T	rustees, Key Employees, and Hig	hest			
	Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.							}
▶ Attach to Form 990.								
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.gov/For</u>	<u>'m990</u> tor	instructions and the latest inform	nation.		to Pul ectio	
	ne of the organiza				Employer identificat	ion nu	ımber	
	BOARD OF DIRECTO TENBERG COLLEGE	DRS OF			31-0537177			
Pa	rt I Questi	ons Regarding Compensation		•				
							Yes	No
1a		plate box(es) if the organization proving ection A, line 1a Complete Part III to						
		or charter travel	lacksquare	Housing allowance or residence for	•			
		companions		Payments for business use of persoi				
		nification and gross-up payments	∀	Health or social club dues or initiation				
	□ Discretion	ary spending account	▼	Personal services (e g , maid, chauf	reur, cher)			
b		kes in line 1a are checked, did the org ill of the expenses described above? If			ent or reimbursement	1b	Yes	
2		ition require substantiation prior to re			. 1-2	2	Yes	
	directors, truste	es, officers, including the CEO/Executi	ive Directo	r, regarding the items checked in line	· Iar			
3		of any, of the following the filing organ			ne			
	_	EO/Executive Director Check all that a d organization to establish compensat		•	n Part III			
	✓ Compens	ation committee	~	Written employment centract				
		ent committee	V	Written employment contract Compensation survey or study				
		of other organizations	<u> </u>	Approval by the board or compensa	tion committee			
4		. did any person listed on Form 990, P	art VII Co					
4	related organiza		ait vii, se	ction A, line 1a, with respect to the h	ing organization of a			
а	Receive a sever	ance payment or change-of-control pa	yment?			4a		No
b	Participate in, o	receive payment from, a supplement	al nonqual	ıfıed retırement plan?		4b	Yes	
С		receive payment from, an equity-bas	•	•		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons and prov	ide the app	plicable amounts for each item in Part	: III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) orga	nizations	must complete lines 5-9.				
5	For persons liste	ed on Form 990, Part VII, Section A, li		-				
	compensation c	ontingent on the revenues of						
a	The organization					5a		No
b	Any related orga	anization? 5a or 5b, describe in Part III				5b		No_
6	•	ed on Form 990, Part VII, Section A, III	ne 1a didi	the organization hav or accrue any				
•		ontingent on the net earnings of	ne ra, ala	the organization pay or accrue any				
а	The organization	۱۶				6a		No
b	Any related orga					6b		No
	•	If "Yes," on line 6a or 6b, describe in Part III						
7		For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III						No
8	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe							
	in Part III					8		No
9		3, did the organization also follow the	rebuttable	presumption procedure described in	Regulations section			
	53 4958-6(c)?					9		
For D	Danarwork Body	ction Act Notice, see the Instructi	and for Ed	rm 990 Cat No 5	0053T Schedule 1	/Form	4 9901	2018

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

			y Employees, and Hi					
For each individual whose instructions, on row (ii) E Note. The sum of column	o no	ot list any individuals that	t are not listed on Form 99	90, Part VII				t ındıvıdual
(A) Name and Title			of W-2 and/or 1099-MIS (ii) Bonus & incentive compensation		(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
1 DR MICHAEL L FRANDSEN PRESIDENT		307,735	0	11,500	33,000	23,819	376,054	0
FRESIDENT	(ii)	0	0	0	0	0	0	0
2 MARY JO ZEMBER INTERIM PROVOST	(i)	181,974	0	1,183	9,280	11,973	204,410	0
	(ii)	0	0	0	0	0	0	0
3 JAMES BECSEY DIRECTOR OF PHYSICAL	(i)	124,296	0	928	6,760	20,820	152,804	0
PLANT		0	0	0	0	0	0	0
4 WENDY KOBLER VP FOR UNIVERSITY	(i)	151,745	0	9,896	3,754	3,489	168,884	0
ADVANCEMENT	(ii)	0	0	0	0	0	0	0

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							
	DR MICHAEL L FRANDSEN WAS HIRED IN JULY 2017 HE RECEIVES PERSONAL USE OF A RESIDENCE, A CAR AND A CLUB MEMBERSHIP THE CLUB MEMBERSHIP AND THE CAR, PERSONAL USE TAXABLE, ARE INCLUDED IN HIS TAXABLE COMPENSATION REPORTED ON THIS FORM 990 THE PERSONAL USE OF A RESIDENCE IS NOT INCLUDED IN 2018 TAXABLE COMPENSATION BUT IS REPORTED IN COLUMN D AS A NONTAXABLE BENEFIT THE RESIDENCE IS FURNISHED FOR THE						

FACULTY, STAFF, AND STUDENT FUNCTIONS THE PRESIDENT IS REQUIRED TO LIVE IN THE RESIDENCE AS A CONDITION OF EMPLOYMENT AND THE RESIDENCE

Page 3

AND THE CAR, PERSONAL USE TAXABLE, ARE INCLUDED IN HIS TAXABLE COMPENSATION REPORTED ON THIS FORM 990 THE PERSONAL USE OF A RESIDENCE IS NOT INCLUDED IN 2018 TAXABLE COMPENSATION BUT IS REPORTED IN COLUMN D AS A NONTAXABLE BENEFIT THE RESIDENCE IS FURNISHED FOR THE CONVENIENCE OF WITTENBERG UNIVERSITY AND THE ANNUAL VALUE OF THE RESIDENCE IS \$18,000 THE VALUE OF UTILITIES, HOUSEKEEPING, SUPPLIES, AND OTHER HOME EXPENSES IS \$10,368, WHICH IS ALSO REPORTED IN COLUMN D AS A NONTAXABLE BENEFIT THE RESIDENCE IS AVAILABLE FOR USE TO HOST

IS CONTIGUOUS TO WITTENBERG'S CAMPUS

Schedule J (Form 990) 2018

Return Reference	Explanation
· · · · · · · · · · · · · · · · · · ·	DURING THE YEAR THERE WAS A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN PAYMENT MADE PURSUANT TO A CONFIDENTIAL AGREEMENT ALL AMOUNTS PAID HAVE BEEN PROPERLY REPORTED ON FORM W-2 AND REPORTED IN FORM 990, PART VII, COLUMN D, AND ALSO IN SCHEDULE J, PART II, COLUMN B(III)

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	te: To capture the full cont	ent of this docum	ent, please select lands	cape mode	e (11" x 8	.5") wl	hen p	rinting.							
	hedule K	Sui	onlemental Inform	nation o	n Tay-F	Evem	nt F	Ronde				OMB N	o 1545	-0047	
(Form 990) Supplemental Information on Tax-Exempt Bonds Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions,											2	018	R		
			explanations, and any	y additional	informatio				,				_		
	artment of the Treasury rnal Revenue Service		► Attach ►Go to www.irs.gov/F	to Form 99		informa	ation						n to Pul spectio		
Nam	ne of the organization		r do to <u>www.msiqor/r</u>	101	the latest		11.0111			Emplo	yer iden	tification		·· <u> </u>	
	BOARD OF DIRECTORS OF TENBERG COLLEGE									31-05	37177				
	art I Bond Issues														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP # (d) Da	te issued	(e) Issue	price	((f) Descripti	on of purpose	(g) Defeased		(h) ((i) Pool	
												behali Issue		financing	
										Yes	No	Yes	+	Yes	No
Α	PUBLIC FINANCE AUTHORITY	27-3866124	74445FAC8 10-25	5-2016	43,3	97,732			NDING BONDS,		Х		Х		X
								AL PROJECT	OF CREDIT, AND Γ						
Pa	art II Proceeds				1										
	Amount of bands retired					A			В		;			D	
1	Amount of bonds retired Amount of bonds legally defeas					30,912	2,/0/								
2	Total proceeds of issue					42.20	7 722								
3	Gross proceeds in reserve fund			• • •		43,397						_			
<u>4</u> 5	Capitalized interest from proceed					3,98.	7,731								
<u>-</u>	Proceeds in refunding escrows														
- 7	Issuance costs from proceeds .					00/	6 022								
/	Credit enhancement from proceeds.					996	6,832								
<u> </u>	Working capital expenditures fr						-					-			
10	Capital expenditures from proce					6 00	2,278								
11	Other spent proceeds			•		0,002	2,276								
12	Other unspent proceeds														
13	Year of substantial completion .				7	016									
					Yes	No	, 	Yes	No	Yes	No		Yes	l 1	No No
14	Were the bonds issued as part	of a current refunding	ıssue?		X		_								
15	Were the bonds issued as part	of an advance refundi	ng issue?			X									
16	Has the final allocation of proce	eds been made?.			Х										
17	Does the organization maintain proceeds?		1.1	ocation of	×										
Pä	art III Private Business Us				1				<u>I</u>			L		<u> </u>	
						A		ı	В	(;			D	
					Yes	No	•	Yes	No	Yes	No		Yes		No
1	Was the organization a partner financed by tax-exempt bonds?			ned property		X									
2	Are there any lease arrangeme property?			financed		×									
Ear	Panerwork Peduction Act Noti	ce see the Instruct	ions for Form 000			t No 5	01035		· · · · · · · · · · · · · · · · · · ·		C.	chodulo	K /Forr	2000	1 2019

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

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

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

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

Rebate not due yet?

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

b

d

6

Part IV

b

C

Arbitrage

Page 2

D

Schedule K (Form 990) 2018

No

Yes

×

0 %

0 %

0 %

В

No

Yes

C

No

Yes

Х

Χ

Χ

No

Χ

Χ

Χ

Χ

Х

Α

Yes

Χ

Χ

Х

ITOTAL PROCEEDS ON LINE 3 ARE NOT IDENTICAL TO THE ISSUE PRICE LISTED IN PART I DUE TO INVESTMENT FARNINGS

Yes

Х

No

Explanation

Χ

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

Page 3

No

D

D

No

Yes

Yes

C

No

Yes

No

Yes

R

No

Yes

		/	4
		Yes	No
а	Were gross proceeds invested in a guaranteed investment contract		V

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

Schedule K (Form 990) 2018

(GIC)?

period?

Part VI

Arbitrage (Continued)

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?

Term of GIC

requirements of section 148? . . .

Return Reference

SCHEDULE K, PART II, LINE 3

efil	e GRAPHIC pr	int - DO NOT PF	ROCESS	As Filed Data -			DLN:	9349313	9008	700
	EDULE M		N	loncash Contri	hutions			OMB No 1	545-0	047
(For	m 990)		ı	ioncasii contri	Dutions			20	10)
		l -	_	ons answered "Yes" on F	orm 990, Part IV, lines 2	9 or 3	0.	20	10)
		► Attach to Form								
•	tment of the Treasury al Revenue Service	▶Go to <u>www.irs.c</u>	gov/Form9	90 for the latest informa				Open to Inspe	ction	
	of the organizate of the organizate of the organizate of the organization of the organ					Emplo	yer ident	ification n	umber	•
	ENBERG COLLEGE	(3 0)				31-05	37177			
Pa	rt I Types	of Property	_							
			(a)	(b)	(c)			(d)		
			Check If applicable	Number of contributions or items contributed	Noncash contribution amounts reported on	Ι.		of determinentribution a		-
			аррисавіе	items contributed	Form 990, Part VIII, line	'	ioricasii co	incribation a	mount	3
					1g					
1	Art—Works of art									
3	Art—Historical transformation Art—Fractional in					1				
4	Books and public									
	Clothing and hou									
-										
	Cars and other v									
7	Boats and planes									
8	Intellectual prope	,			4 000 044	\				
9	Securities—Public Securities—Close	•	X	31	4,932,840	JEMV				
	Securities—Close Securities—Partr	•								
	or trust interest									
12	Securities—Misce	ellaneous								
13	Qualified conserve contribution—Histructures .	istoric								
14	Qualified conserv	vation								
1 =	contribution—Of									
	Real estate—Res					-				
17	Real estate—Oth					 				
18	Collectibles .									
19	Food inventory									
20	Drugs and medic	cal supplies .								
21	Taxidermy .									
	Historical artifact									
	Scientific specim					-				
	Archeological art	ifacts	V	8	21.02/	COCT	-			
	Other ► (. PROPERTY)		X	٥	31,936	10031				
	Other ▶ (ONAL PROPERTY)	Х	4	25,850	соѕт	=			
27	Other ▶ ()								
28	Other ▶ ()								
29				ition during the tax year for 3, Part IV, Donee Acknowled		29				
	for which the org	janization completed	1 FOITH 6263	s, Part IV, Donee Acknowled	gement				Yes	No
302	During the year	did the organizatio	n receive h	contribution any property	renorted in Part I lines 1 th	rough	28 that it		res	
304	must hold for at		om the date	e of the initial contribution,				·		_{NI-}
b	If "Yes," describ	e the arrangement	ın Part II					30a		No
31	Does the organi	zation have a gift ac	cceptance p	olicy that requires the review	v of any nonstandard contri	butions	s?	31	Yes	
32a		zation hire or use th		or related organizations to s	olicit, process, or sell nonca	sh •		32a	Yes	
Ь	If "Yes," describ	e ın Part II								
33	If the organizati	on did not report ar	amount in	column (c) for a type of pro	perty for which column (a)	ıs chec	ked,			
	describe in Part	II								
For D	anerwork Reductiv	on Act Notice, see the	a Instruction	s for Form 990	Cat No. 512271		Schoo	lule M (Form	990) /	2018\

Schedule M (Form 990) (2018)	Page 2
I, column (b), the	formation. ation required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part number of contributions, the number of items received, or a combination of both. Also complete iditional information.
Return Reference	Explanation
PART I, LINE 32B	THE ORGANIZATION USES SECURITY TRUST TO SELL STOCK GIFTS ALSO, THE ORGANIZATION ENGAGES WITH ROYALL TO DEVELOP AND MAIL PROMOTIONAL SOLICITATIONS, HOWEVER, ROYALL DOES NOT SOLICIT ON BEHALF OF THE ORGANIZATION
	Schedule M (Form 990) (2018)

efile GRAPH	IC print - DO NOT PROCESS	As Filed Data -		DLN:	93493139008700		
SCHEDUL (Form 990 or EZ)	990- Complete to pr Form 990	ovide information fo or 990-EZ or to prov ▶ Attach to Forr	on to Form 990 or 9 r responses to specific quest ide any additional information n 990 or 990-EZ. 90 for the latest information.	ions on n.	OMB No 1545-0047 2018 Open to Public Inspection		
Name! Setherong THE BOARD OF DII WITTENBERG COLL 990 Schedule	RECTORS OF	on		Employer identi	fication number		
Return Reference			Explanation				
FORM 990, PART VI, SECTION B, LINE 11B	LIC ACCOUNTING FIRM, THE ORGANIZATION'S CFO AND CONTROLLER, AND THE AUDIT COMMITTEE WILL DO A DETAILED REVIEW OF THE RETURN PRIOR TO FILING						

Return Explanation
Reference

990 Schedule O, Supplemental Information

FORM 990,	ALL BOARD MEMBERS AND KEY EMPLOYEES ARE REQUIRED TO ANNUALLY COMPLETE THE CONFLICT OF INTE
PART VI,	REST QUESTIONNAIRE REPORTED POTENTIAL CONFLICTS ARE DISCLOSED TO THE AUDIT COMMITTEE AND
SECTION B,	DISCUSSED IF A CONFLICT IS FOUND, THE MEMBER WITH THE CONFLICT ABSTAINS FROM VOTING ON TH
LINE 12C	E RELATED ISSUE

990 Schedule O, Supplemental Information

Return Explanation

Return Reference

FORM 990,	PRESIDENT, OFFICER, & KEY EMPLOYEE COMPENSATION IS REVIEWED USING COMPENSATION SURVEYS AND
PART VI,	COMPENSATION DATA FROM PEER INSTITUTIONS THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTO
SECTION B,	RS REVIEWED THE PRESIDENT'S COMPENSATION IN 2017 WHEN DR FRANDSEN WAS HIRED, AND THE PRES
LINE 15	IDENT REVIEWED OFFICER AND KEY EMPLOYEE COMPENSATION IN 2018 AND AS NEW EMPLOYEES JOINED T

HE ORGANIZATION. THE BOARD ANNUALLY REVIEWS THE PRESIDENT'S PERFORMANCE IN CLOSED SESSION.

Return Explanation
Reference

990 Schedule O, Supplemental Information

FORM 990, THE ORGANIZATION DOES NOT MAKE DOCUMENTS AVAILABLE TO THE PUBLIC
PART VI,
SECTION C,
LINE 19

Explanation Return Reference

FORM 990. CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS 192.288 PARTNERSHIP INCOME FROM K-1S NOT INC PART XI. LUDED ON FINANCIAL STATEMENTS -984.677 CHANGE IN NET ASSETS ATTRIBUTABLE TO THE NONCONTRO LINE 9 LLING INTEREST 926.932 NET ASSETS ATTRIBUTABLE TO A CONSOLIDATED ENTITY WRONGLY INCLUDED

-23.242.372

990 Schedule O, Supplemental Information

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R** (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990.

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

2018

DLN: 93493139008700 OMB No 1545-0047

> Open to Public Inspection

Employer identification number

THE BOARD OF DIRECTORS OF WITTENBERG COLLEGE						31-0	537177				
Part I Identification of Disregarded Entities Complete	ıf the organızatıon aı	nswered "Yes	" on Form 9	990, Part	IV, lıne 3	3.					
(a) Name, address, and EIN (If applicable) of disregarded entity	Prima	(b) Primary activity		(c) Legal domicile (state or foreign country)		come	(e) End-of-year assets		ssets (f) Direct control entity		
Part II Identification of Related Tax-Exempt Organization	ons Complete if the	organization	answered "	'Yes" on F	orm 990.	Part I\	/. line 34 be	cause	ıt had one or	more	
related tax-exempt organizations during the tax year. (a) Name, address, and EIN of related organization	(b) Primary activity	(b) (c)		(d) Exempt Code section		Public	(e) charity status ion 501(c)(3))	s Direct controllin		Section (13) col	512(b
(1)WEST WARD STREET DEVELOPMENT CORPORATION 200 WEST WARD STREET SPRINGFIELD, OH 45501 82-3768946	SUPPORT WITTENBERG UNIVERSITY'S LONG-TE FACILITY NEEDS		ОН	501(C)(3)		LINE 12	C, III-FI	N/A		Yes	No No
										_	
For Paperwork Reduction Act Notice, see the Instructions for Form	990		at No 50135	5Y				Sche	edule R (Form	990) 24	118

one or more related organizations treated as a partnership during the tax year.

(c) (d) (e) (f) (g) (h) (1) (j) (k) Name, address, and EIN of Primary activity Legal Direct controlling Predominant Share of Share of end-Disproprtionate Code V-UBI General or Percentage related organization income(related, of-year allocations? ownership domicile entity total amount in managing (state unrelated, ıncome assets box 20 of partner? excluded from Schedule K-1 foreign tax under (Form 1065) country) sections 512-514) Yes No Yes No (1) 1929 FIELDHOUSE LLC No No CONSTRUCTION OF ОН 58,197,412 100 000 % HEALTH, WELLNESS, & ATHLÉTICS 250 BILL EDWARDS DRIVE SPRINGFIELD, OH 45501 FACILITY 47-4525153 (2) 1929 FIELDHOUSE MASTER TENANT LLC SUPPORTING WITTENBERG 1,195,841 No No 100 000 % UNIVERSITY WITTENBERG 200 WEST WARD ST UNIVERSITY'S SPRINGFIELD, OH 45501 LONG-TERM 82-3802582 FACILITY NEEDS Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. See Additional Data Table (b) (c) (d) (e) (g) (h) (ı) Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512(b) Primary activity related organization domicile (C corp, S corp, ownership (13) controlled entity ıncome year (state or foreign entity? or trust) assets country) No Yes Schedule R (Form 990) 2018

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had

c Gift, grant, or capital contribution from related organization(s).

Loans or loan guarantees to or for related organization(s) . .

No

No

No

No

No

No

No

No

No

No No

No

No

No

No

No

No

Part V Transactions With Related Organizations Complete if 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 organization 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					
h. Gift, grant, or capital contribution to related organization(s)	1b		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)

(c)

Amount involved

m Performance of services or membership or fundraising solicitations by related organization(s)

(a)

Name of related organization

1c

1d 1e

1g 1h

11

1 m

1n

10

1q

1r

1s

Schedule R (Form 990) 2018

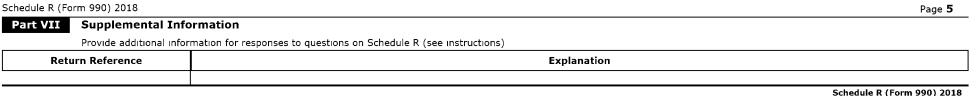
(d)

Method of determining amount involved

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-	01	(e) re all partners section 501(c)(3) rganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ate	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



Additional Data

(3) CHARITABLE REMAINDER TRUST (1)

(4) CHARITABLE REMAINDER TRUSTS (1)

(5) CHARITABLE REMAINDER TRUSTS (2)

(6) CHARITABLE REMAINDER TRUST (1)

1929 MASTER TENANT MANAGING MEMBER

INC

82-3772730

PO BOX 720

82-3786518

250 BILL EDWARDS DR SPRINGFIELD, OH 45501

SPRINGFIELD, OH 45501

(8) 1929 MANAGING MEMBER INC

Software ID: **Software Version:**

EIN: 31-0537177

Name: THE BOARD OF DIRECTORS OF

NY

ОН

OR

VT

ОН

ОН

		WITTENBI	ERG COLLEGE					
Form 990, Schedule R, Part IV - Iden	tification of Related	Organizations ⁻	Taxable as a Cor	poration or Trus	st			
(a) Name address and FIN of	(b)	(c)	(d)	(e)	(f) Share of total	(g) Share of end-of-year	(h) Percentage	(i) Section 512

related organization	Primary activity	domicile (state or foreign country)	entity	(C corp, S corp, or trust)	income	assets	ownership	(b)(olled
								Yes	No
(1) CHARITABLE REMAINDER TRUST (1)	TRUST	AZ	N/A	Т					No
(1) CHARITABLE REMAINDER TRUST (1)	TRUST	СТ	N/A	Т					No

N/A

N/A

N/A

N/A

N/A

N/A

No

No

No

No

No

No

No

46,440

20,979,432

related organization	, ,	domicile (state or foreign country)	entity	(C corp, S corp, or trust)	
(1) CHARITABLE REMAINDER TRUST (1)	TRUST	AZ	N/A	Т	
(1) CHARITABLE REMAINDER TRUST (1)	TRUST	СТ	N/A	Т	
(2) CHARITABLE REMAINDER TRUSTS (2)	TRUST	IN	N/A	Т	

TRUST

TRUST

TRUST

TRUST