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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047

2019

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2019 , and ending 06-30-2020

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
DICKINSON COLLEGE

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)
PO BOX 1773

Room/suite

City or town, state or province, country, and ZIP or foreign postal code
CARLISLE, PA 170132896

D Employer identification number
23-1365954

E Telephone number
(717) 245-1943

G Gross receipts $ 251,423,711

F Name and address of principal officer:
MARGARET M ENSIGN
PO BOX 1773
CARLISLE, PA 170132896

H(a) Is this a group return for subordinates? ☐Yes ☑No
H(b) Are all subordinates included? ☐Yes ☐No
If "No," attach a list. (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status: ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.DICKINSON.EDU

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1783

M State of legal domicile: PA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
DICKINSON COLLEGE, FOUNDED IN 1783, IS A HIGHLY SELECTIVE, PRIVATE RESIDENTIAL (CONTINUED)LIBERAL ARTS COLLEGE KNOWN FOR ITS INNOVATIVE CURRICULUM. FOR MORE THAN TWO CENTURIES, DICKINSON HAS EMBRACED THE VISION OF AN EVER-EVOLVING EDUCATION, AN EDUCATION THAT PREPARES RISING GENERATIONS FOR SUCCESSFUL, ACTIVE, INFORMED LIVES AS GLOBAL LEADERS, WORKING FOR THE COMMON GOOD. DICKINSON CONTINUES TO SEEK NEW WAYS TO STRENGTHEN THE INDIVIDUALIZED, INTERDISCIPLINARY EDUCATION IT PROVIDES WHILE CONTINUING TO PREPARE SCHOLARS WITH INTELLECTUAL AGILITY, ETHICAL GROUNDING, INTERCULTURAL UNDERSTANDING AND THE SKILLS TO WORK TOWARD A JUST AND SUSTAINABLE WORLD. PLEASE REFER TO PART III, LINE 4 FOR A DETAILED DESCRIPTION OF THE COLLEGE'S PROGRAM SERVICE ACCOMPLISHMENTS.

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	40
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	39
5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	2,813
6	Total number of volunteers (estimate if necessary)	6	1,296
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	551,297
b	Net unrelated business taxable income from Form 990-T, line 39	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	9,308,116	14,046,918
	9	Program service revenue (Part VIII, line 2g)	164,903,211	145,929,337
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	23,046,239	23,430,624
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,269,639	490,691
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	198,527,205	183,897,570
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	60,218,287	58,089,584
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	77,512,450	77,261,777
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	22,030	33,600
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶5,054,239		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	53,949,748	48,201,065
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	191,702,515	183,586,026
	19	Revenue less expenses. Subtract line 18 from line 12	6,824,690	311,544
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	731,813,464	727,423,592
	21	Total liabilities (Part X, line 26)	156,896,778	163,743,052
	22	Net assets or fund balances. Subtract line 21 from line 20	574,916,686	563,680,540

Part II 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.

Sign Here

Signature of officer — Date 2021-05-06

BRONTE D BURLEIGH-JONES VP FINANCE AND ADMIN & TREAS
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN P01498698
Firm's name ▶ KPMG LLP			Firm's EIN ▶ 13-5565207	
Firm's address ▶ 8350 BROAD STREET SUITE 900 MCLEAN, VA 22102			Phone no. (703) 286-8000	

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III **Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission:

DICKINSON COLLEGE PROVIDES A USEFUL, INNOVATIVE AND INTERDISCIPLINARY EDUCATION IN THE LIBERAL ARTS AND SCIENCES TO PREPARE STUDENTS TO LEAD RICH AND FULFILLING LIVES OF ENGAGED GLOBAL LEADERSHIP, WORKING FOR THE COMMON GOOD.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 135,036,151 including grants of $ 57,373,277) (Revenue $ 117,986,460)

See Additional Data

4b (Code:) (Expenses $ 26,318,412 including grants of $ 716,307) (Revenue $ 28,401,994)

See Additional Data

4c (Code:) (Expenses $ including grants of $) (Revenue $)

4d Other program services (Describe in Schedule O.)
(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses ▶** 161,354,563

Part 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*	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? *If "Yes," complete Schedule D,*Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D,* Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	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	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		No
e	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*	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	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	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		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	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	Yes	

Part IV Checklist of Required Schedules *(continued)*

			Yes	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	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L,* Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L,* Part I	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L,*Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		No
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O.	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	3,190			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	

Part V **Statements Regarding Other IRS Filings and Tax Compliance** *(continued)*

				Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	**2a**	2,813			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			**2b**	Yes	
3a Did the organization have unrelated business gross income of $1,000 or more during the year?			**3a**	Yes	
b If "Yes," has it filed a Form 990-T for this year?*If "No" to line 3b, provide an explanation in Schedule O*			**3b**	Yes	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			**4a**	Yes	
b If "Yes," enter the name of the foreign country: ▶AR , CM , FR , GM , IT , SP , UK See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			**5a**		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			**5b**		No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			**5c**		
6a Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			**6a**		No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			**6b**		
7 **Organizations that may receive deductible contributions under section 170(c).**					
a Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			**7a**		No
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			**7b**		
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**		
8 **Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			**8**		
9 **Sponsoring organizations maintaining donor advised funds.**					
a Did the sponsoring organization make any taxable distributions under section 4966?			**9a**		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			**9b**		
10 **Section 501(c)(7) organizations.** Enter:					
a Initiation fees and capital contributions included on Part VIII, line 12	**10a**				
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	**10b**				
11 **Section 501(c)(12) organizations.** Enter:					
a Gross income from members or shareholders	**11a**				
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	**11b**				
12a **Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			**12a**		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	**12b**				
13 **Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O.			**13a**		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	**13b**				
c Enter the amount of reserves on hand	**13c**				
14a Did the organization receive any payments for indoor tanning services during the tax year?			**14a**		No
b If "Yes," has it filed a Form 720 to report these payments?*If "No," provide an explanation in Schedule O*			**14b**		
15 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.			**15**		No
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.			**16**		No

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

Section 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** 40			
	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** 39			
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**	Yes	
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:				
a	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

Section B. Policies (*This Section B requests information about policies not required by the Internal Revenue Code.*)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	**10a**		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	**10b**		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	**11a**	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	**12a**	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	**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?			
a	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**		No
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?	**16b**		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed▶ AK , CO , MA , MD , MI , NH , PA , WA

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☑ Upon request ☑ Other (explain in Schedule O)

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.

20 State the name, address, and telephone number of the person who possesses the organization's books and records:
▶BRONTE D BURLEIGH-JONES VP FIN & ADMIN 230 WEST LOUTHER STREET CARLISLE, PA 170132896 (717) 245-1943

Part VII **Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
See Additional Data Table										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
See Additional Data Table										

	(D)	(E)	(F)
1b Sub-Total ▶			
c Total from continuation sheets to Part VII, Section A ▶			
d Total (add lines 1b and 1c) ▶	3,469,531	0	564,549

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 75

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
WARFEL CONSTRUCTION COMPANY 1110 ENTERPRISE ROAD EAST PETERSBURG, PA 17520	CONSTRUCTION	1,776,319
CENTURION CONSTRUCTION GROUP LLC 516 INDUSTRIAL DR LEWISBERRY, PA 17339	CONSTRUCTION	1,429,353
SIEMENS INDUSTRY INC 5095 RITTER ROAD MECHANICSBURG, PA 17055	CONSTRUCTION	316,889
SCHOOL FOR FIELD STUDIES 100 CUMMINGS CENTER SUITE 534-G BEVERLY, MA 01915	STUDY ABROAD PROGRAMS	290,635
RLPS LLP 250 VALLEYBROOK DRIVE LANCASTER, PA 17601	ARCHITECTURE	277,125

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 16

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts						
1a Federated campaigns	1a	137,142				
b Membership dues	1b					
c Fundraising events	1c					
d Related organizations	1d					
e Government grants (contributions)	1e	2,786,924				
f All other contributions, gifts, grants, and similar amounts not included above	1f	11,122,852				
g Noncash contributions included in lines 1a - 1f:$	1g	1,022,543				
h **Total.** Add lines 1a-1f ▶			14,046,918			
Program Service Revenue		Business Code				
2a TUITION AND FEES		900099	116,940,975	116,940,975		
b ROOM AND BOARD		721310	22,604,748	22,604,748		
c OTHER AUXILIARY SERVIC		721000	5,828,820	5,661,766	135,480	31,574
d OTHER STUDENT FEES		900099	537,506	537,506		
e PROGRAM-RELATED INVEST		523000	17,288	17,288		
f All other program service revenue.						
g **Total.** Add lines 2a–2f. ▶			145,929,337			
Other Revenue						
3 Investment income (including dividends, interest, and other similar amounts) ▶			1,808,533		415,817	1,392,716
4 Income from investment of tax-exempt bond proceeds ▶			14,909			14,909
5 Royalties ▶						
		(i) Real / (ii) Personal				
6a Gross rents	6a					
b Less: rental expenses	6b					
c Rental income or (loss)	6c					
d Net rental income or (loss) ▶						
		(i) Securities / (ii) Other				
7a Gross amount from sales of assets other than inventory	7a	88,644,789 / 488,534				
b Less: cost or other basis and sales expenses	7b	67,525,931 / 210				
c Gain or (loss)	7c	21,118,858 / 488,324				
d Net gain or (loss) ▶			21,607,182			21,607,182
8a Gross income from fundraising events (not including $ ____ of contributions reported on line 1c). See Part IV, line 18	8a					
b Less: direct expenses	8b					
c Net income or (loss) from fundraising events ▶						
9a Gross income from gaming activities. See Part IV, line 19	9a					
b Less: direct expenses	9b					
c Net income or (loss) from gaming activities ▶						
10a Gross sales of inventory, less returns and allowances	10a					
b Less: cost of goods sold	10b					
c Net income or (loss) from sales of inventory ▶						
Miscellaneous Revenue		Business Code				
11a OTHER REVENUES		900099	490,691	490,691		
b						
c						
d All other revenue						
e **Total.** Add lines 11a–11d ▶			490,691			
12 **Total revenue.** See instructions ▶			183,897,570	146,252,974	551,297	23,046,381

Part IX **Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	**(A)** Total expenses	**(B)** Program service expenses	**(C)** Management and general expenses	**(D)** Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	220,800	220,800		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	52,869,601	52,869,601		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	4,999,183	4,999,183		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,870,878		2,535,620	335,258
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	54,638,719	45,599,042	6,300,348	2,739,329
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	3,900,409	3,220,073	479,468	200,868
9 Other employee benefits	11,837,847	9,768,274	1,478,480	591,093
10 Payroll taxes	4,013,924	3,242,684	559,123	212,117
11 Fees for services (non-employees):				
a Management				
b Legal	208,855		208,855	
c Accounting	194,428		194,428	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	33,600			33,600
f Investment management fees	2,073,825		2,073,825	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,874,039	1,390,393	385,272	98,374
12 Advertising and promotion	72,185	35,903	36,282	
13 Office expenses	3,975,780	3,187,527	505,402	282,851
14 Information technology	2,399,227	1,215,603	1,158,927	24,697
15 Royalties				
16 Occupancy	7,659,725	7,198,610	427,637	33,478
17 Travel	1,724,575	1,358,305	168,535	197,735
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	430,914	383,118	41,130	6,666
20 Interest	4,618,288	4,618,288		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	11,862,088	11,459,254	282,020	120,814
23 Insurance	733,903	708,980	17,448	7,475
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 expenses on Schedule O.)				
a TUITION	3,588,140	3,588,140		
b FOOD AND ENTERTAINMENT	3,139,134	2,922,666	71,384	145,084
c REPAIRS AND MAINTENANCE	932,366	884,919	47,447	
d BOOKSTORE	707,596	707,596		
e All other expenses	2,005,997	1,775,604	205,593	24,800
25 **Total functional expenses.** Add lines 1 through 24e	183,586,026	161,354,563	17,177,224	5,054,239
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).				

Part X Balance Sheet

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

			(A) Beginning of year		(B) End of year
1	Cash–non-interest-bearing		47,116	1	42,481
2	Savings and temporary cash investments		20,069,306	2	22,746,258
3	Pledges and grants receivable, net		25,566,433	3	22,132,058
4	Accounts receivable, net		2,989,870	4	2,319,430
5	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5	
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
7	Notes and loans receivable, net		504,900	7	520,543
8	Inventories for sale or use		1,218,531	8	1,326,051
9	Prepaid expenses and deferred charges		2,244,592	9	1,032,701
10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 371,862,267			
b	Less: accumulated depreciation	10b 170,760,657	206,205,919	10c	201,101,610
11	Investments—publicly traded securities		49,573,883	11	67,440,470
12	Investments—other securities. See Part IV, line 11		415,263,070	12	400,885,018
13	Investments—program-related. See Part IV, line 11		6,911,458	13	6,931,301
14	Intangible assets		0	14	0
15	Other assets. See Part IV, line 11		1,218,386	15	945,671
16	**Total assets.** Add lines 1 through 15 (must equal line 34)		731,813,464	16	727,423,592
17	Accounts payable and accrued expenses		10,649,323	17	8,249,000
18	Grants payable		0	18	0
19	Deferred revenue		3,051,214	19	6,816,775
20	Tax-exempt bond liabilities		133,636,738	20	129,455,414
21	Escrow or custodial account liability. Complete Part IV of Schedule D		2,519,682	21	2,563,115
22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		0	22	0
23	Secured mortgages and notes payable to unrelated third parties		0	23	0
24	Unsecured notes and loans payable to unrelated third parties		1,152,761	24	11,033,911
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		5,887,060	25	5,624,837
26	**Total liabilities.** Add lines 17 through 25		156,896,778	26	163,743,052
	Organizations that follow FASB ASC 958, check here ▶ ☑ and complete lines 27, 28, 32, and 33.				
27	Net assets without donor restrictions		359,906,495	27	357,875,635
28	Net assets with donor restrictions		215,010,191	28	205,804,905
	Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.				
29	Capital stock or trust principal, or current funds			29	
30	Paid-in or capital surplus, or land, building or equipment fund			30	
31	Retained earnings, endowment, accumulated income, or other funds			31	
32	Total net assets or fund balances		574,916,686	32	563,680,540
33	Total liabilities and net assets/fund balances		731,813,464	33	727,423,592

Part XI Reconcilliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	183,897,570
2	Total expenses (must equal Part IX, column (A), line 25)	2	183,586,026
3	Revenue less expenses. Subtract line 2 from line 1	3	311,544
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	574,916,686
5	Net unrealized gains (losses) on investments	5	-12,916,926
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	1,369,236
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	563,680,540

Part XII Financial Statements and Reporting

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

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

Additional Data

Software ID:
Software Version:
EIN: 23-1365954
Name: DICKINSON COLLEGE

Form 990 (2019)

Form 990, Part III, Line 4a:

EDUCATING STUDENTS - DICKINSON COLLEGE IS COMMITTED TO MAKING A TOP-TIER EDUCATION IN THE LIBERAL ARTS AND SCIENCES ACCESSIBLE REGARDLESS OF FAMILIES' ECONOMIC MEANS. ALL ADMITTED STUDENTS FROM THE MOST RECENT ENTERING CLASS, WHO DEMONSTRATED FINANCIAL NEED AND WHO MET APPLICATION DEADLINES, WERE OFFERED AID. IN 2019-20, DICKINSON STUDENTS RECEIVED AN ESTIMATED $76,552,486 IN FINANCIAL AID, OF WHICH $60,939,979 WAS PROVIDED FROM THE COLLEGE'S FUNDS. STATE AND FEDERAL AID PROGRAMS, PARENT LOANS AND OTHER OUTSIDE SOURCES PROVIDED THE REMAINING FUNDS. CONTINUED ON SCHEDULE OIN FALL 2019, THE COLLEGE EMPLOYED 236 FULL-TIME EQUIVALENT FACULTY. 95% OF FULL-TIME FACULTY MEMBERS HOLD A DOCTORATE OR OTHER TERMINAL DEGREE. OF THIS GROUP, FULL PROFESSORS COMPRISED 26%, ASSOCIATE PROFESSORS 38%, ASSISTANT PROFESSORS 27%, AND INSTRUCTORS 9%. THE STUDENT-TO-FACULTY RATIO FOR FALL 2019 WAS 8:1. TO SUPPORT ITS ACADEMIC, STUDENT LIFE AND AUXILIARY PROGRAMS, THE COLLEGE ALSO EMPLOYS 289 PROFESSIONAL ADMINISTRATIVE STAFF PERSONNEL (ALL FT) AND 367 SUPPORT STAFF PERSONNEL (310 FT; 57 PT).DICKINSON CONTINUES TO RECEIVE FAVORABLE AND FREQUENT MEDIA ATTENTION AND ATTRACT GREATER LEVELS OF STUDENT INTEREST EACH YEAR. AS THE NUMBER OF APPLICATIONS AND THE QUALITY AND DIVERSITY OF RECENT ENTERING CLASSES DEMONSTRATE, DICKINSON HAS A SECURE NATIONAL AND INTERNATIONAL REPUTATION AS A TOP QUALITY LIBERAL ARTS COLLEGE. THE INCREASED LEVEL OF INTEREST THE COLLEGE HAS SEEN IN RECENT YEARS PUTS THE COLLEGE IN A GOOD POSITION TO CONTINUE TO ANALYZE AND BETTER UNDERSTAND THE PROFILE OF STUDENTS WHO ENROLL AND REMAIN AT DICKINSON IN ORDER TO IMPROVE SELECTIVITY, YIELD AND RETENTION.2,133 STUDENTS WERE ENROLLED FOR FALL 2019, INCLUDING 230 STUDENTS STUDYING OFF-CAMPUS AT THE COLLEGE'S CENTERS IN THE U.S. AND ABROAD. FOR FALL 2019, STUDENTS CAME FROM 42 U.S. STATES AND TERRITORIES AND 46 FOREIGN COUNTRIES. THE OFFICE OF ADMISSIONS ADMITTED 2,574 FIRST-YEAR STUDENTS REFLECTING AN ACCEPTANCE RATE OF 40%. FIRST-YEAR ENROLLMENT FIGURES REFLECT THE COLLEGE'S ONGOING COMMITMENT TO ACADEMIC QUALITY (AVERAGE SAT SCORES OF 1,340) AND DIVERSITY (34% STUDENTS OF COLOR AND INTERNATIONAL STUDENTS). THE 1-YEAR RETENTION RATE WAS 87%, AND APPROXIMATELY 80% OF ENTERING FIRST-YEAR STUDENTS GRADUATE WITHIN FOUR YEARS. DICKINSON STUDENTS MAY SELECT EITHER OF TWO BROAD DEGREE ORIENTATIONS WITHIN THE CURRICULUM: THE BACHELOR OF ARTS OR THE BACHELOR OF SCIENCE DEGREE. GENERAL EDUCATION REQUIREMENTS ARE THE SAME IN EITHER CASE; ONLY STUDENTS WITH THE CONCENTRATION IN ONE OF THE NATURAL OR MATHEMATICAL SCIENCES MAY BE CANDIDATES FOR THE BACHELOR OF SCIENCE DEGREE.COURSES ARE OFFERED IN TWO SEMESTERS, EACH COMPRISING 14 WEEKS OF CLASSES FOLLOWED BY FINAL EXAMINATIONS. THE FALL SEMESTER BEGINS IN LATE AUGUST AND CONCLUDES IN DECEMBER. STUDENTS HAVE A READING PERIOD OF A FEW DAYS AT THE END OF CLASSES IN WHICH TO PREPARE FOR THE FINAL EXAMINATIONS AND PAPERS WHICH ARE SCHEDULED DURING THE SUBSEQUENT WEEK. SPRING SEMESTER BEGINS NEAR THE END OF JANUARY AND RUNS THROUGH MID-MAY, FOLLOWING THE SAME PATTERN OF CLASSES AND EXAMINATIONS AS THE FALL SEMESTER. SEEKING A BALANCE BETWEEN THE FULL BREADTH OF LIBERAL LEARNING AND DEPTH REPRESENTED BY ONE DISCIPLINED APPROACH TO KNOWLEDGE, EACH DICKINSON STUDENT IS REQUIRED TO TAKE A MINIMUM OF 32 COURSES, COMPLETE A SERIES OF ALL-COLLEGE REQUIREMENTS, AND SELECT A MAJOR CONCENTRATION.GENERAL REQUIREMENTS FOR THE DEGREE INCLUDE A FIRST-YEAR SEMINAR, ONE "WRITING IN THE DISCIPLINE" COURSE AND ONE "QUANTITATIVE REASONING" COURSE. ADDITIONAL REQUIREMENTS FOR GRADUATION INCLUDE DISTRIBUTION COURSES (AT LEAST ONE COURSE IN THE ARTS, HUMANITIES, SOCIAL SCIENCES AND LABORATORY SCIENCE), CROSS-CULTURAL STUDIES (COURSES IN FOREIGN LANGUAGES, U.S. DIVERSITY AND GLOBAL DIVERSITY), AND ONE COURSE IN SUSTAINABILITY. DICKINSON'S FACULTY TEACH FIVE COURSES ANNUALLY, AS IS THE NORM FOR HIGHLY SELECTIVE NATIONAL LIBERAL ARTS COLLEGES WHERE EXPECTATIONS FOR FACULTY RESEARCH AND STUDENT FACULTY INTERACTION ARE HIGH. INTRODUCTION OF A FIVE COURSE LOAD IN 2007 IN PLACE OF THE PREVIOUS EXPECTATION THAT SIX COURSES WOULD BE TAUGHT EACH YEAR WAS DESIGNED TO SUSTAIN AND ENRICH THE HIGH QUALITY AND VITALITY OF THE COLLEGE'S ACADEMIC PROGRAM. THE TEACHING LOAD HAS ENABLED THE COLLEGE TO: - MAINTAIN EXCELLENCE IN TEACHING, INCLUDING INNOVATION THROUGH NEW, OFTEN LABOR INTENSIVE PEDAGOGIES. - OFFER A RICH CURRICULUM, INCLUDING THE EXPLORATION OF NEW FIELDS OF STUDY (RECENT INTRODUCTION OF MAJORS IN QUANTITATIVE ECONOMICS; CHINESE; JAPANESE; A MINOR IN FILM & MEDIA; AND CERTIFICATES IN FOOD STUDIES AND SOCIAL INNOVATION AND ENTREPRENEURSHIP ARE EXAMPLES). - CONTINUE LEADERSHIP IN SUSTAINABILITY AND GLOBAL ENDEAVORS THAT HAVE GIVEN DICKINSON A POSITION OF NATIONAL LEADERSHIP IN THIS FIELD. - LAUNCH A MAJOR INITIATIVE IN CIVIC ENGAGEMENT WITH THE NEW CENTER FOR CIVIC LEARNING AND ACTION. - SUSTAIN THE FACULTY'S IMPRESSIVE RECORD OF SCHOLARSHIP AND ARTISTIC CREATIVITY BY MEETING PROFESSORS' CURRENT CONCERNS FOR MORE TIME FOR THEIR RESEARCH ACTIVITY. - MAINTAIN THE VITAL ROLE OF THE FACULTY IN THE COLLEGE'S COLLEGIAL GOVERNANCE SYSTEM. - ENHANCE DICKINSON'S COMPETITIVE POSITION IN THE RECRUITMENT OF OUTSTANDING NEW FACULTY. - CONTINUE THE COLLEGE'S RECORD OF STRONG FACULTY RETENTION.

Form 990, Part III, Line 4b:

AUXILIARY SERVICES - AUXILIARY SERVICES PROVIDED BY THE COLLEGE INCLUDE HOUSING AND DINING SERVICES (FOR 1,869 ON-CAMPUS STUDENTS), CAMPUS STORES, AND OTHER SERVICES PROVIDED TO SUPPORT STUDENTS AND EMPLOYEES.IN MARCH 2020, THE GOVERNOR OF THE COMMONWEALTH OF PENNSYLVANIA ISSUED FORMAL STAY AT HOME ORDERS IN RESPONSE TO THE COVID-19 OUTBREAK, WHICH REQUIRED THE COLLEGE TO CLOSE CAMPUS AND COMPLETE COURSE INSTRUCTION VIRTUALLY FOR THE REMAINDER OF THE SPRING SEMESTER. THE COLLEGE ISSUED CREDITS FOR THE UNEARNED PORTION OF HOUSING AND DINING SERVICES PREVIOUSLY BILLED TO STUDENTS. ESSENTIAL SERVICES, INCLUDING HOUSING AND DINING SERVICES, WERE PROVIDED TO A SMALL NUMBER OF STUDENTS WHO WERE UNABLE TO RETURN HOME FOR THE REMAINDER OF THE SEMESTER.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
MARGARET M ENSIGN PRESIDENT	40.00	X		X				474,839	0	59,537
NEIL B WEISSMAN PROVOST AND DEAN	40.00				X			344,704	0	44,022
BRONTE D BURLEIGH-JONES VP FINANCE & ADMIN AND TREASURER	40.00			X				293,181	0	32,728
KIRK I SWENSON VP ADVANCEMENT	40.00				X			273,365	0	48,768
KENNETH E SHULTES AVP SUSTAIN/FAC PLANNING	40.00					X		196,227	0	74,934
ROBERT E RENAUD VP AND CIO	40.00				X			230,010	0	27,599
MELISSA A TORRES PRES/CEO FORUM ON EDUC ABROAD	40.00					X		218,126	0	10,202
KENDALL D ISAAC GENERAL COUNSEL	40.00					X		193,154	0	34,079
GEORGE H STROUD VP STUDENT LIFE & DEAN OF STUDENTS	40.00				X			184,295	0	23,750
KRISTEN KOSTECKY AVP, CAMPUS OPS	40.00					X		182,891	0	23,452

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
SUSAN D ROSE PROFESSOR	40.00					X		168,124	0	36,461
BRENDA K BRETZ FORMER ASST. SECRETARY	40.00						X	168,346	0	34,505
CATHERINE MCDONALD DAVENPORT VP ENROLLMENT MANAGEMENT	40.00				X			154,587	0	46,509
KAREN NEELY FARYNIAK CHIEF OF STAFF AND SECRETARY	40.00			X				163,368	0	32,853
SEAN M WITTE AVP FINANCE AND ASST TREASURER	40.00			X				171,835	0	15,798
JENNIFER R LOVE ASST CHF STAFF/ASST SECRETARY	40.00			X				52,479	0	19,352
JOHN E JONES III TRUSTEE/CHAIR	10.00	X		X				0	0	0
JAMES D CHAMBERS TRUSTEE/VICE CHAIR	6.00	X		X				0	0	0
NEAL B ABRAHAM TRUSTEE/COMMITTEE CHAIR	4.00	X						0	0	0
PETER J ANDERSON TRUSTEE	2.00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
MICHAEL A BLOOM TRUSTEE/COMMITTEE CHAIR	4.00	X						0	0	0
GRETCHEN E BRIGDEN TRUSTEE	2.00	X						0	0	0
MARK S BURGESS TRUSTEE/COMMITTEE CHAIR	4.00	X						0	0	0
DAVID W CARLSON TRUSTEE	2.00	X						0	0	0
LAURA I COLONY TRUSTEE	2.00	X						0	0	0
ERIC DENKER TRUSTEE	2.00	X						0	0	0
ANNIE HANNA ENGEL TRUSTEE	2.00	X						0	0	0
RUTH A FERGUSON TRUSTEE/COMMITTEE CHAIR	4.00	X						0	0	0
JOHN B FRISCH TRUSTEE/COMMITTEE CHAIR	4.00	X						0	0	0
GEORGE V HAGER JR TRUSTEE	2.00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
CAROL CAMPBELL HAISLIP TRUSTEE/COMMITTEE CHAIR	4.00	X						0	0	0
FRANK E JAMES III TRUSTEE	2.00	X						0	0	0
JULIE I JOHNSON TRUSTEE/COMMITTEE CHAIR	4.00	X						0	0	0
THOMAS L KALARIS TRUSTEE	2.00	X						0	0	0
BRIAN E KAMOIE TRUSTEE	2.00	X						0	0	0
MARK I LEHMAN TRUSTEE	2.00	X						0	0	0
ALBERT H MASLAND TRUSTEE	2.00	X						0	0	0
WILLIAM L MUELLER TRUSTEE	2.00	X						0	0	0
AMY L NAUIOKAS TRUSTEE	2.00	X						0	0	0
SARA G NASH TRUSTEE	2.00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
KELLIE L NEWTON TRUSTEE	2.00	X						0	0	0
TONI A ORTEGA TRUSTEE	2.00	X						0	0	0
DARRELL I PACHECO TRUSTEE	2.00	X						0	0	0
YOUNG K PARK TRUSTEE	2.00	X						0	0	0
DOUGLAS J PAULS TRUSTEE/COMMITTEE CHAIR	4.00	X						0	0	0
JENNIFER WARD REYNOLDS TRUSTEE/COMMITTEE CHAIR	4.00	X						0	0	0
MICHELE MAHONEY RICHARDSON TRUSTEE/COMMITTEE CHAIR	4.00	X						0	0	0
LISA E SHERMAN TRUSTEE	2.00	X						0	0	0
CHARLES H SILVERMAN TRUSTEE	2.00	X						0	0	0
STEPHEN M SMITH TRUSTEE	2.00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
SYLVIA M SMITH TRUSTEE	2.00	X						0	0	0
MARJORIE A SPEERS TRUSTEE/COMMITTEE CHAIR	4.00	X						0	0	0
ROBERT T SYMINGTON TRUSTEE/COMMITTEE CHAIR	4.00	X						0	0	0
CRAIG C WEEKS TRUSTEE/COMMITTEE CHAIR	4.00	X						0	0	0
AARON S WILLIAMS TRUSTEE	2.00	X						0	0	0

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
DICKINSON COLLEGE

Employer identification number
23-1365954

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☑ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ 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 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170 (b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)

9 ☐ An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:

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 organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations . . . . ______

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . .	7,420,512	11,449,581	17,028,258	9,308,116	14,046,918	59,253,385
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge..						
4 **Total.** Add lines 1 through 3	7,420,512	11,449,581	17,028,258	9,308,116	14,046,918	59,253,385
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . .						5,097,679
6 **Public support.** Subtract line 5 from line 4.						54,155,706

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4. .	7,420,512	11,449,581	17,028,258	9,308,116	14,046,918	59,253,385
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . .	1,550,099	1,549,254	1,357,052	1,533,598	1,439,199	7,429,202
9 Net income from unrelated business activities, whether or not the business is regularly carried on. .						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). .	3,519,339	2,177,455	1,025,396	1,269,639	490,691	8,482,520
11 **Total support.** Add lines 7 through 10						75,165,107

12 Gross receipts from related activities, etc. (see instructions)	12	788,346,132

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	72.050 %
15 Public support percentage for 2018 Schedule A, Part II, line 14	15	68.220 %

16a **33 1/3% support test—2019.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶ ☑

b **33 1/3% support test—2018.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶ ☐

17a **10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . ▶ ☐

b **10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . ▶ ☐

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a 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.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6. . .						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. .						
b Unrelated business taxable income (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 Other income. Do not include gain or 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 the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**. . . . . ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2019** (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from **2018** Schedule A, Part III, line 17	18	

19a **331/3% support tests—2019.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶ ☐

b **33 1/3% support tests—2018.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . ▶ ☐

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

		Line	Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *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		
2	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		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	3a		
b	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		
c	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.*	3c		
4a	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		
b	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 supervised by or in connection with its supported organizations.*	4b		
c	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		
5a	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 amendment to the organizing document).*	5a		
b	**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?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its 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		
7	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		
8	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		
9a	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		
b	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.***	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in **Part VI.***	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).*	10b		

Part IV **Supporting Organizations** (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	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.***	**11c**		

Section 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 organization.*	**2**		

Section 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**		

Section 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?	**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**		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**:

- **a** ☐ The organization satisfied the Activities Test. Complete **line 2** below.
- **b** ☐ The organization is the parent of each of its supported organizations. Complete **line 3** below.
- **c** ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions)

			Yes	No
2	Activities Test. **Answer (a) and (b) below.**			
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.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* ***Part VI.***	**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.*	**3b**		

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	**1**		
2	Recoveries of prior-year distributions	**2**		
3	Other gross income (see instructions)	**3**		
4	Add lines 1 through 3	**4**		
5	Depreciation and depletion	**5**		
6	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	**1b**		
c	Fair market value of other non-exempt-use assets	**1c**		
d	**Total** (add lines 1a, 1b, and 1c)	**1d**		
e	**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-integrated Type III supporting organization (see instructions)

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in **Part VI**). See instructions	
7 **Total annual distributions.** Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	**(i) Excess Distributions**	**(ii) Underdistributions Pre-2019**	**(iii) Distributable Amount for 2019**
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in **Part VI**). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, 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 2019. 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 2020.** Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

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).

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
PART II, LINE 10 OTHER INCOME	OTHER REVENUES: 2015 $3,519,339 2016 $2,177,455 2017 $1,025,396 2018 $1,269,639 2019 $ 490,691 TOTAL $8,482,520

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public 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
DICKINSON COLLEGE	23-1365954

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

1 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)

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $

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 ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 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 ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

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 filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
1					
2					
3					
4					
5					
6					

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing organization's totals	**(b)** Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		

If the amount on line 1e, column (a) or (b) is:	**The lobbying nontaxable amount is:**
Not over $500,000	20% of the amount on line 1e.
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000.
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000.
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000.
Over $17,000,000	$1,000,000.

	(a)	(b)
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a. If zero or less, enter -0-.		
i Subtract line 1f from line 1c. If zero or less, enter -0-.		

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2016	**(b)** 2017	**(c)** 2018	**(d)** 2019	**(e)** Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B **Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a) Yes	(a) No	(b) Amount
1	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:			
a	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		No	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?	Yes		
j	Total. Add lines 1c through 1i			0
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

			Yes	No
1	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?	2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		

Part III-B **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 answered "Yes."**

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	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)	5	

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 COLLEGE DOES NOT DIRECTLY ENGAGE IN LOBBYING ACTIVITY. HOWEVER, A PORTION OF THE DUES PAID TO PROFESSIONAL ORGANIZATIONS MAY BE USED FOR LOBBYING ON BEHALF OF MEMBER INSTITUTIONS.

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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
DICKINSON COLLEGE

Employer identification number
23-1365954

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)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 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

6 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.

1 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

2 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
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ ____________

4 Number of states where property subject to conservation easement is located ▶ ____________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ ____________

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $ ____________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 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.

1a 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.

b 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 ▶ $ 171,990

(ii) Assets included in Form 990, Part X ▶ $ 2,830,303

2 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:

a Revenue included on Form 990, Part VIII, line 1 ▶ $ ____________

b Assets included in Form 990, Part X ▶ $ ____________

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☑ Public exhibition

b ☑ Scholarly research

c ☑ Preservation for future generations

d ☐ Loan or exchange programs

e ☐ Other ....

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?. . . ☐ **Yes** ☑ **No**

Part IV **Escrow and Custodial Arrangements.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? . . . . ☐ **Yes** ☑ **No**

b If "Yes," explain the arrangement in Part XIII and complete the following table:

			Amount
c	Beginning balance	1c	
d	Additions during the year	1d	
e	Distributions during the year	1e	
f	Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . ☑ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII . . . . ☑

Part V **Endowment Funds.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	**(b)** Prior year	**(c)** Two years back	**(d)** Three years back	**(e)** Four years back
1a Beginning of year balance	482,115,376	467,544,916	441,394,962	407,956,152	439,533,704
b Contributions	3,038,827	3,516,520	9,531,079	3,938,597	1,655,554
c Net investment earnings, gains, and losses	8,241,959	30,923,105	35,924,152	48,577,041	-15,172,948
d Grants or scholarships	8,016,104	7,682,448	7,255,295	7,074,886	6,859,099
e Other expenditures for facilities and programs	9,790,049	9,460,248	9,389,043	9,372,710	8,881,067
f Administrative expenses	2,834,480	2,726,469	2,660,939	2,629,232	2,319,992
g End of year balance	472,755,529	482,115,376	467,544,916	441,394,962	407,956,152

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ 57.350 %

b Permanent endowment ▶ 28.190 %

c Temporarily restricted endowment ▶ 14.460 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) unrelated organizations	3a(i)	Yes	
(ii) related organizations	3a(ii)	Yes	
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?	3b	Yes	

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI **Land, Buildings, and Equipment.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	**(a)** Cost or other basis (investment)	**(b)** Cost or other basis (other)	**(c)** Accumulated depreciation	**(d)** Book value
1a Land	5,736,854	11,441,495		17,178,349
b Buildings		314,016,455	143,289,993	170,726,462
c Leasehold improvements		1,676,091	1,526,016	150,075
d Equipment		23,542,566	20,334,771	3,207,795
e Other		15,448,806	5,609,877	9,838,929
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				201,101,610

Part VII Investments—Other Securities.
Complete if the organization answered "Yes" on Form 990, Part IV, line 11b.See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) HEDGE FUNDS	224,966,629	F
(B) PRIVATE EQUITY FUNDS	130,391,627	F
(C) REAL ASSET FUNDS	25,809	F
(D) FUNDS HELD IN TRUSTS BY OTHERS	45,500,953	F
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* ▶	400,885,018	

Part VIII Investments—Program Related.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 13.)* ▶		

Part IX Other Assets.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* ▶	

Part X Other Liabilities.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ANNUITIES PAYABLE	3,508,915
(3) U.S. GOVERNMENT ADVANCES REFUNDABLE	1,957,036
(4) OBLIGATIONS UNDER CAPITAL LEASES	158,886
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 25.)* ▶	5,624,837

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☑

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

1	Total revenue, gains, and other support per audited financial statements			1	113,254,934
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	-11,547,690		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	-57,021,121		
e	Add lines **2a** through **2d**			2e	-68,568,811
3	Subtract line **2e** from line **1**			3	181,823,745
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	2,073,825		
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	2,073,825
5	Total revenue. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12.)			5	183,897,570

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

1	Total expenses and losses per audited financial statements			1	124,491,080
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	452,807		
e	Add lines **2a** through **2d**			2e	452,807
3	Subtract line **2e** from line **1**			3	124,038,273
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	2,073,825		
b	Other (Describe in Part XIII.)	4b	57,473,928		
c	Add lines **4a** and **4b**			4c	59,547,753
5	Total expenses. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18.)			5	183,586,026

Part XIII **Supplemental Information**

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

Return Reference	Explanation
See Additional Data Table	

Part XIII **Supplemental Information** ***(continued)***

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 23-1365954
Name: DICKINSON COLLEGE

Supplemental Information

Return Reference	Explanation
PART III, LINE 4:	THE EMIL R. WEISS CENTER FOR THE ARTS HOUSES THE TROUT GALLERY, WHICH IS USED FOR A VARIETY OF EXHIBITIONS, LECTURES, AND DEMONSTRATIONS RELATING TO THE COLLEGE'S FINE ARTS COLLECTION. THE TROUT GALLERY SERVES AS A CONTINUOUS DISPLAY OF ART EXHIBITS AND IS LOCATED IN SUCH AN AREA OF THE CAMPUS SO AS TO STIMULATE GENERAL STUDENT INTEREST AND BE A SERVICE TO THE HUMANITIES.

Supplemental Information

Return Reference	Explanation
PART IV, LINE 2B:	FUNDS HELD IN CUSTODY FOR OTHERS INCLUDE FUNDS RECEIVED FROM OFFICIALLY RECOGNIZED STUDENT ORGANIZATIONS AND OTHER ORGANIZATIONS SPECIFICALLY APPROVED BY THE VICE PRESIDENT FOR FIN ANCE AND ADMINISTRATION. RELATED ASSETS ARE REPORTED ON FORM 990, PART X AND ARE ACCOUNTED FOR IN A MANNER CONSISTENT WITH THE COLLEGE'S REPORTING SYSTEM.

Supplemental Information

Return Reference	Explanation
PART V, LINE 4:	THE COLLEGE'S ENDOWMENT CONSISTS OF APPROXIMATELY 900 INDIVIDUAL FUNDS ESTABLISHED FOR A V ARIETY OF PURPOSES INCLUDING FINANCIAL AID, FACULTY SALARIES AND BENEFITS, LIBRARY RESOURC ES, BUILDING MAINTENANCE, STUDENT LOANS AND OTHER PROGRAMMATIC SUPPORT. NET ASSETS ASSOCIA TED WITH ENDOWMENT FUNDS, INCLUDING FUNDS DESIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENTS, ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPO SED RESTRICTIONS. THE COLLEGE HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT A SSETS THAT ATTEMPT TO PROVIDE A PREDICTABLE STREAM OF FUNDING TO PROGRAMS SUPPORTED BY ITS ENDOWMENT WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT ASSETS. UNDER T HIS POLICY, AS APPROVED BY THE BOARD OF TRUSTEES, THE ENDOWMENT ASSETS ARE INVESTED IN A M ANNER THAT IS INTENDED TO PRODUCE RESULTS THAT EXCEED THE ENDOWMENT SPENDING RATE PLUS INF LATION, DEFINED AS THE CONSUMER PRICE INDEX PLUS 1%, WHILE ASSUMING A MODERATE LEVEL OF IN VESTMENT RISK. IN FY'20, SPENDING FROM THE ENDOWMENT PROVIDED APPROXIMATELY 14.1% OR $16.8 MILLION OF DICKINSON'S OPERATING BUDGET REVENUES, WITH ANOTHER $3.8 MILLION GOING TO REST RICTED FUNDS. THE POOLED ENDOWMENT POSTED RETURNS OF 2.3% FOR THE FISCAL YEAR ENDED JUNE 3 0, 2020 AND HAS AVERAGED ANNUAL RETURNS OF 8.5% OVER THE PAST DECADE. DICKINSON'S LONG-TER M RETURNS REGULARLY PLACE THE COLLEGE IN THE TOP DECILE OF PEER PERFORMANCE ACCORDING TO T HE NACUBO-TIAA STUDY OF ENDOWMENTS.

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	THE COLLEGE HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT FROM FEDERAL INC OME TAX UNDER SECTION 501(C)(3) OF THE U.S. INTERNAL REVENUE CODE, EXCEPT FOR TAXES ON INC OME FROM ACTIVITIES UNRELATED TO ITS EXEMPT PURPOSE. ACCORDINGLY, THE COLLEGE IS NOT SUBJE CT TO INCOME TAXES EXCEPT TO THE EXTENT IT HAS TAXABLE INCOME FROM ACTIVITIES THAT ARE NOT RELATED TO ITS EXEMPT PURPOSE. NO PROVISIONS FOR INCOME TAXES HAVE BEEN MADE IN THE ACCOM PANYING FINANCIAL STATEMENTS FOR THE YEARS ENDED JUNE 30, 2020 OR 2019. ACCOUNTING PRINCIP LES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA (GAAP) REQUIRE MANAGEMENT TO EVALUA TE TAX POSITIONS TAKEN BY THE COLLEGE AND RECOGNIZE A TAX LIABILITY (OR ASSET) IF THE COLL EGE HAS TAKEN AN UNCERTAIN TAX POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED U PON EXAMINATION BY THE IRS. MANAGEMENT HAS ANALYZED THE TAX POSITIONS TAKEN BY THE COLLEGE , AND HAS CONCLUDED THAT AS OF JUNE 30, 2020 AND 2019, THERE ARE NO UNCERTAIN POSITIONS TA KEN OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION OF A LIABILITY (OR ASSET) OR DI SCLOSURE IN THE FINANCIAL STATEMENTS.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS:	STUDENT AID OFFSETTING REVENUES IN FINANCIAL STATEMENTS -57,473,928. L'ASSOCIATION DICKINSON EN FRANCE STUDY ABROAD PROGRAM 452,807.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS:	L'ASSOCIATION DICKINSON EN FRANCE STUDY ABROAD PROGRAM 452,807.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS:	STUDENT AID INCLUDED WITH GRANTS ON THE 990 57,473,928.

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SCHEDULE E (Form 990 or 990-EZ)

Department of the Treasury

Schools

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to *www.irs.gov/Form990EZ* for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
DICKINSON COLLEGE

Employer identification number
23-1365954

Part I

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space use Part II.	3	Yes	
4	Does the organization maintain the following?			
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.			
5	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	5a		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		No
e	Educational policies?	5e		No
f	Use of facilities?	5f		No
g	Athletic programs?	5g		No
h	Other extracurricular activities?	5h		No
	If you answered "Yes" to any of the above, please explain. If you need more space, use 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.	7	Yes	

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	THE COLLEGE'S POLICY ON NONDISCRIMINATION IS INCLUDED IN ALL PRINTED SOLICITATION MATERIALS AND IS MAINTAINED FOR PUBLIC ACCESS VIA THE COLLEGE WEB SITE.
SCHEDULE E, PART I, LINE 6	BEYOND THE NUMEROUS INDIVIDUAL RESEARCH GRANTS AWARDED TO OUR FACULTY, DICKINSON COLLEGE HAS RECEIVED SEVERAL NATIONALLY COMPETITIVE INSTITUTIONAL AWARDS IN RECENT YEARS. THESE GRANTS ARE SIGNIFICANT NOT ONLY BECAUSE OF THE FUNDING THEY PROVIDE TO SUPPORT PEDAGOGICAL INNOVATION AND NEW PROGRAM INITIATIVES, BUT ALSO BECAUSE THEY PROVIDE EXTERNAL VALIDATION FOR THE EXCELLENCE OF OUR ACADEMIC ENTERPRISE. THEY REFLECT THE COLLEGE'S STRATEGIC VISION OF AN ACADEMIC CURRICULUM THAT COMBINES A STRONG COMMITMENT TO THE BEST TRADITIONS OF THE LIBERAL ARTS WITH A DESIRE TO INNOVATE AND INTRODUCE PROGRAMMING THAT SPEAKS TO CONTEMPORARY CONCERNS.

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
DICKINSON COLLEGE

Employer identification number
23-1365954

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . . ☑ **Yes** ☐ **No**

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.

3 Activites per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
See Add'l Data					
3a Sub-total	4	77			45,002,393
b Total from continuation sheets to Part I . . .	2	23			5,620,950
c **Totals** (add lines 3a and 3b)	6	100			50,623,343

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . ▶

3 Enter total number of other organizations or entities . . . . ▶

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
See Add'l Data							

Part 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

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; 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 provide any additional information. See instructions.

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2:	THE COLLEGE'S INSTITUTIONAL METHODOLOGY USED TO DETERMINE ELIGIBILITY FOR GRANT FUNDS IS OUTLINED IN SCHEDULE I, PART IV. GRANT FUNDS PROVIDED TO INDIVIDUALS OUTSIDE OF THE UNITED STATES INCLUDE FINANCIAL AID AWARDS FOR STUDENTS STUDYING ABROAD.

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART III ACCOUNTING METHOD:	

Additional Data

Software ID:
Software Version:
EIN: 23-1365954
Name: DICKINSON COLLEGE

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
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	GLOBAL STUDY ABROAD PROGRAMS	108,735
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTMAKING		83,130

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
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		39,309,724
EAST ASIA AND THE PACIFIC	0	2	PROGRAM SERVICES	GLOBAL STUDY ABROAD PROGRAMS	1,115,048

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
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	ADMISSIONS RECRUITING	10,864
EAST ASIA AND THE PACIFIC	0	0	GRANTMAKING		1,097,495

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
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	RESEARCH AND DEVELOPMENT	8,059
EUROPE	4	75	PROGRAM SERVICES	GLOBAL STUDY ABROAD PROGRAMS	3,269,338

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
EUROPE	0	0	PROGRAM SERVICES	ADMISSIONS RECRUITING	3,809
EUROPE	0	0	GRANTMAKING		3,060,140

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
EUROPE	0	0	FUNDRAISING		6,823
EUROPE	0	0	PROGRAM RELATED INVESTING		1,049,795

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
EUROPE	0	0	PROGRAM SERVICES	RESEARCH AND DEVELOPMENT	49,212
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	GLOBAL STUDY ABROAD PROGRAM	135,252

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
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	ADMISSIONS RECRUITING	3,444
MIDDLE EAST AND NORTH AFRICA	0	0	GRANTMAKING		105,000

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
NORTH AMERICA	0	0	PROGRAM SERVICES	ADMISSIONS RECRUITING	1,938
NORTH AMERICA	0	0	PROGRAM SERVICES	RESEARCH AND DEVELOPMENT	7,128

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
RUSSIA AND NEIGHBORING STATES	0	18	PROGRAM SERVICES	GLOBAL STUDY ABROAD PROGRAM	88,340
RUSSIA AND NEIGHBORING STATES	0	0	GRANTMAKING		98,815

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
RUSSIA AND NEIGHBORING STATES	0	0	PROGRAM SERVICES	RESEARCH AND DEVELOPMENT	2,698
SOUTH AMERICA	1	4	PROGRAM SERVICES	GLOBAL STUDY ABROAD PROGRAM	226,375

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
SOUTH AMERICA	0	0	FUNDRAISING		1,088
SOUTH AMERICA	0	0	GRANTMAKING		390,070

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
SOUTH AMERICA	0	0	PROGRAM SERVICES	RESEARCH AND DEVELOPMENT	5,488
SOUTH ASIA	0	0	PROGRAM SERVICES	GLOBAL STUDY ABROAD PROGRAM	41,366

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
SOUTH ASIA	0	0	PROGRAM SERVICES	ADMISSIONS RECRUITING	7,712
SOUTH ASIA	0	0	GRANTMAKING		36,394

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	1	1	PROGRAM SERVICES	GLOBAL STUDY ABROAD PROGRAM	166,580
SUB-SAHARAN AFRICA	0	0	GRANTMAKING		128,139

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	0	0	PROGRAM SERVICES	RESEARCH AND DEVELOPMENT	5,344

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)
INSTITUTIONAL SCHOLARSHIPS FOR STUDENTS STUDYING ABROAD	CENTRAL AMERICA AND THE CARIBBEAN	4			83,130	NON-CASH CREDIT TO STUDENT ACCOUNTS	OTHER
INSTITUTIONAL SCHOLARSHIPS FOR STUDENTS STUDYING ABROAD	EAST ASIA AND THE PACIFIC	62			1,097,495	NON-CASH CREDIT TO STUDENT ACCOUNTS	OTHER

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)
INSTITUTIONAL SCHOLARSHIPS FOR STUDENTS STUDYING ABROAD	EUROPE (INCLUDING ICELAND & GREENLAND)	146			3,060,140	NON-CASH CREDIT TO STUDENT ACCOUNTS	OTHER
INSTITUTIONAL SCHOLARSHIPS FOR STUDENTS STUDYING ABROAD	MIDDLE EAST AND NORTH AFRICA	4			105,000	NON-CASH CREDIT TO STUDENT ACCOUNTS	OTHER

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)
INSTITUTIONAL SCHOLARSHIPS FOR STUDENTS STUDYING ABROAD	RUSSIA AND NEIGHBORING STATES	4			98,815	NON-CASH CREDIT TO STUDENT ACCOUNTS	OTHER
INSTITUTIONAL SCHOLARSHIPS FOR STUDENTS STUDYING ABROAD	SOUTH AMERICA	16			390,070	NON-CASH CREDIT TO STUDENT ACCOUNTS	OTHER

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)
INSTITUTIONAL SCHOLARSHIPS FOR STUDENTS STUDYING ABROAD	SOUTH ASIA	2			36,394	NON-CASH CREDIT TO STUDENT ACCOUNTS	OTHER
INSTITUTIONAL SCHOLARSHIPS FOR STUDENTS STUDYING ABROAD	SUB-SAHARAN AFRICA	5			128,139	NON-CASH CREDIT TO STUDENT ACCOUNTS	OTHER

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding 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.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
DICKINSON COLLEGE

Employer identification number
23-1365954

Part I **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a ☑ Mail solicitations
b ☑ Internet and email solicitations
c ☑ Phone solicitations
d ☑ In-person solicitations
e ☑ Solicitation of non-government grants
f ☑ Solicitation of government grants
g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☑ Yes ☐ No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
LANGLEY INNOVATIONS LLC 3719 SPRIGG STREET NORTH FREDERICK, MD 21704	CONSULTING		No	0	33,600	-33,600
Total . . . . ▶					33,600	-33,600

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

AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

Part II **Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				

Part III **Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: ______

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: ______

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: ______

11 Does the organization conduct gaming activities with nonmembers? . . . . ☐ **Yes** ☐ **No**

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . ☐ **Yes** ☐ **No**

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility . . . . **13a** %

b An outside facility . . . . **13b** %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . ☐ **Yes** ☐ **No**

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ ____________ and the amount of gaming revenue retained by the third party ▶ $ ____________.

c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference	Explanation

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Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
DICKINSON COLLEGE

Employer identification number
23-1365954

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ **Yes** ☐ **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II 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 organization or government	**(b)** EIN	**(c)** IRC section (if applicable)	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of noncash assistance	**(h)** Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . ▶ 4

3 Enter total number of other organizations listed in the line 1 table . . . . ▶ 0

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) INSTITUTIONAL SCHOLARSHIPS FOR STUDENTS	1459		52,474,745	OTHER	NON-CASH CREDIT TO STUDENT ACCOUNTS
(2) CARES ACT GRANTS TO STUDENTS	169	352,792			
(3) ACADEMIC AWARDS AND FELLOWSHIPS FOR STUDENTS	86	42,064			
(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.

Return Reference	Explanation
PART I, LINE 2:	DURING 2019-20, 77% OF THE TOTAL DICKINSON STUDENT BODY RECEIVED FINANCIAL AID FROM THE COLLEGE. SINCE MOST OF THE COLLEGE'S GRANT AWARDS ARE MADE TO STUDENTS WITH DEMONSTRATED FINANCIAL NEED, THE MAJORITY OF THESE FUNDS SUPPLEMENTED THE CONTRIBUTION THAT ELIGIBLE FAMILIES MADE TOWARD TUITION, FEES, ROOM AND BOARD CHARGES. THE COLLEGE'S INSTITUTIONAL METHODOLOGY USED TO DETERMINE ELIGIBILITY FOR GRANT FUNDS CONSIDERS ADDITIONAL FACTORS BEYOND THE DATA ITEMS REQUESTED ON THE FAFSA. THESE INCLUDE (BUT ARE NOT LIMITED TO) HOME EQUITY, A CONTRIBUTION FROM THE NONCUSTODIAL PARENT, AND IN THE CASE OF A FAMILY WITH MORE THAN ONE STUDENT IN COLLEGE, AN EVALUATION OF THE ACTUAL COSTS INVOLVED IN SUPPORTING THE OTHER STUDENT(S). PARENTS IN COLLEGE AND SIBLINGS IN GRADUATE SCHOOL ARE NOT NORMALLY COUNTED AS OTHER FAMILY MEMBERS IN COLLEGE. DICKINSON EXPECTS EACH FINANCIAL AID RECIPIENT TO WORK DURING THE SUMMER AND CONTRIBUTE A MINIMUM OF $2,000 TOWARD COLLEGE COSTS. STUDENTS ARE ALSO EXPECTED TO CONTRIBUTE A PORTION OF THEIR ASSETS EACH YEAR FOR EDUCATIONAL EXPENSES. SOME STUDENTS RECEIVE EDUCATIONAL BENEFITS FROM GOVERNMENTAL AGENCIES SUCH AS THE VETERANS' ADMINISTRATION AND STATE BUREAUS OF VOCATIONAL REHABILITATION OR FROM PARENTS' EMPLOYERS IN THE FORM OF TUITION REMISSION. SUCH BENEFITS MUST BE TAKEN INTO CONSIDERATION WHEN DETERMINING THE FINANCIAL AID PACKAGE. THE FINANCIAL AID AWARD NOTICE WILL LIST ALL THE FINANCIAL AID PROGRAMS FOR WHICH THE STUDENT IS ELIGIBLE. THE AMOUNT OF FINANCIAL AID THAT THE STUDENT RECEIVES FROM THESE PROGRAMS DEPENDS ON THE STUDENT'S COMPUTED NEED. THE AMOUNT OF DICKINSON GRANT AND SCHOLARSHIP AID MAY ALSO BE INFLUENCED BY THE ACADEMIC ACHIEVEMENT AND PROMISE OF THE APPLICANT. STUDENTS' FINANCIAL NEED IS RECALCULATED FOR EACH YEAR OF ATTENDANCE; AS A RESULT, AWARDED AMOUNTS OF NEED-BASED AID MAY VARY AS NEED CHANGES. THE COLLEGE ATTEMPTS TO MAINTAIN APPROXIMATELY THE SAME AMOUNT OF DICKINSON GRANT FUNDS FROM YEAR TO YEAR UNLESS NEED CHANGES SIGNIFICANTLY. THE STUDENT IS REQUIRED TO SUBMIT A PROFILE APPLICATION IF, AS A RESULT OF A SIGNIFICANT CHANGE IN FAMILY CIRCUMSTANCES, ADDITIONAL ASSISTANCE IS BEING REQUESTED.
SCHEDULE I, PART III	GRANTS AND ASSISTANCE ARE APPLIED TO STUDENT ACCOUNTS AFTER THE START OF EACH SEMESTER OR TERM. DOMESTIC GRANTS AND ASSISTANCE TO INDIVIDUALS REPORTED ON SCHEDULE I INCLUDE FINANCIAL AID PROVIDED TO STUDENTS STUDYING AT THE MAIN CAMPUS IN CARLISLE OR AT OTHER DOMESTIC PROGRAM LOCATIONS. FOREIGN GRANTS AND ASSISTANCE TO INDIVIDUALS REPORTED ON SCHEDULE F INCLUDE FINANCIAL AID PROVIDED TO STUDENTS STUDYING ABROAD. THE COLLEGE RECEIVED FEDERAL ASSISTANCE THROUGH THE CORONAVIRUS AID, RELIEF, AND ECONOMIC SECURITY ACT (CARES ACT). THE CARES ACT GRANTS TO STUDENTS REPORTED IN PART III REPRESENT EMERGENCY RELIEF GRANTS RELATED TO THE COVID-19 OUTBREAK.

Additional Data

Software ID:
Software Version:
EIN: 23-1365954
Name: DICKINSON COLLEGE

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
BOROUGH OF CARLISLE 53 WEST SOUTH STREET CARLISLE, PA 17013	23-6002842	GOVERNMENT	50,000		FMV		PAYMENT IN LIEU OF TAXES
CLEAN AIR TASK FORCE INC 114 STATE STREET 6TH FLOOR BOSTON, MA 02109	04-3512550	501(C)(3)	100,000		FMV		DONOR FUNDED ENVIRONMENTAL ACTIVISM PRIZE

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DOWNTOWN CARLISLE ASSOCIATION 53 WEST SOUTH STREET CARLISLE, PA 17013	23-2224862	501(C)(3)	50,000		FMV		GENERAL SUPPORT
UNITED WAY OF CARLISLE & CUMBERLAND COUNTY 145 SOUTH HANOVER STREET CARLISLE, PA 17013	23-1552261	501(C)(3)	10,000		FMV		EMERGENCY FUND

Schedule J (Form 990)

Compensation Information

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
DICKINSON COLLEGE

Employer identification number
23-1365954

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☑ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☑ Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	2	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☑ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☑ Compensation survey or study ☑ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	5a		No
b	Any related organization?	5b		No
	If "Yes," on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	6a		No
b	Any related organization?	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	7		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	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

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

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	**(B)** Breakdown of W-2 and/or 1099-MISC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
See Additional Data Table							

Part III Supplemental Information

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
PART I, LINE 1A	SCHEDULE J, PART I, LINE 1A: COLLEGE OWNED HOUSING IS PROVIDED TO THE PRESIDENT AS A CONDITION OF EMPLOYMENT. THE PRESIDENT'S HOUSE MANAGER IS RESPONSIBLE FOR KEEPING THE HOUSE SECURE, WELL-MAINTAINED, AND PHYSICALLY AND AESTHETICALLY COMFORTABLE FOR THE RESIDENTS AND VISITORS. THIS PART-TIME POSITION IS ALSO RESPONSIBLE FOR SUPERVISING HOUSEKEEPERS, PROJECT CREWS, CATERING CREWS, OUTSIDE VENDORS PERFORMING WORK ON THE PROPERTY AND IN THE HOUSE, AND HOME REPAIR AND IMPROVEMENT CREWS. THE FAIR VALUE OF HOUSING AND RELATED SERVICES ARE REPORTED IN COLUMN (D) AS NONTAXABLE COMPENSATION IN PART II FOR THE PRESIDENT. ON OCCASION, PERSONAL MEALS ARE PREPARED FOR THE PRESIDENT BY DINING SERVICES. THESE MEALS ARE CONSIDERED TAXABLE COMPENSATION AND ARE REPORTED IN COLUMN (B) AS TAXABLE COMPENSATION IN PART II.

Additional Data

Software ID:
Software Version:
EIN: 23-1365954
Name: DICKINSON COLLEGE

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1MARGARET M ENSIGN PRESIDENT	(i)	461,724	0	13,115	23,360	36,177	534,376	0
	(ii)	0	0	0	0	0	0	0
1NEIL B WEISSMAN PROVOST AND DEAN	(i)	333,382	0	11,322	23,360	20,662	388,726	0
	(ii)	0	0	0	0	0	0	0
2 BRONTE D BURLEIGH-JONES VP FINANCE & ADMIN AND TREASURER	(i)	291,701	0	1,480	23,360	9,368	325,909	0
	(ii)	0	0	0	0	0	0	0
3KIRK I SWENSON VP ADVANCEMENT	(i)	268,927	0	4,438	23,360	25,408	322,133	0
	(ii)	0	0	0	0	0	0	0
4KENNETH E SHULTES AVP SUSTAIN/FAC PLANNING	(i)	194,690	0	1,537	16,445	58,489	271,161	0
	(ii)	0	0	0	0	0	0	0
5ROBERT E RENAUD VP AND CIO	(i)	224,036	0	5,974	18,362	9,237	257,609	0
	(ii)	0	0	0	0	0	0	0
6MELISSA A TORRES PRES/CEO FORUM ON EDUC ABROAD	(i)	208,747	0	9,379	0	10,202	228,328	0
	(ii)	0	0	0	0	0	0	0
7KENDALL D ISAAC GENERAL COUNSEL	(i)	192,524	0	630	16,065	18,014	227,233	0
	(ii)	0	0	0	0	0	0	0
8GEORGE H STROUD VP STUDENT LIFE & DEAN OF STUDENTS	(i)	181,497	0	2,798	6,442	17,308	208,045	0
	(ii)	0	0	0	0	0	0	0
9KRISTEN KOSTECKY AVP, CAMPUS OPS	(i)	181,158	0	1,733	14,897	8,555	206,343	0
	(ii)	0	0	0	0	0	0	0
10SUSAN D ROSE PROFESSOR	(i)	165,019	0	3,105	12,032	24,429	204,585	0
	(ii)	0	0	0	0	0	0	0
11BRENDA K BRETZ FORMER ASST. SECRETARY	(i)	164,616	0	3,730	14,128	20,377	202,851	0
	(ii)	0	0	0	0	0	0	0
12 CATHERINE MCDONALD DAVENPORT VP ENROLLMENT MANAGEMENT	(i)	153,399	0	1,188	13,168	33,341	201,096	0
	(ii)	0	0	0	0	0	0	0
13KAREN NEELY FARYNIAK CHIEF OF STAFF AND SECRETARY	(i)	161,010	0	2,358	13,766	19,087	196,221	0
	(ii)	0	0	0	0	0	0	0
14SEAN M WITTE AVP FINANCE AND ASST TREASURER	(i)	171,278	0	557	13,962	1,836	187,633	0
	(ii)	0	0	0	0	0	0	0

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Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
▶ Attach to Form 990.
▶Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

Name of the organization
DICKINSON COLLEGE

Employer identification number
23-1365954

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	CUMBERLAND COUNTY MUNICIPAL AUTHORITY	23-6003119	230614GB9	09-06-2012	40,480,007	REFINANCING AND CONSTRUCTION		X		X		X
B	CUMBERLAND COUNTY MUNICIPAL AUTHORITY	23-6003119	230614KD0	03-31-2016	47,842,881	REFINANCING		X		X		X
C	CUMBERLAND COUNTY MUNICIPAL AUTHORITY	23-6003119	230614LH0	02-15-2017	35,125,731	REFINANCING AND CONSTRUCTION		X		X		X
D	CUMBERLAND COUNTY MUNICIPAL AUTHORITY	23-6003119	230614MF3	12-27-2017	10,876,429	REFINANCING		X		X		X

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired				
2	Amount of bonds legally defeased				
3	Total proceeds of issue	40,504,541	47,842,884	35,335,798	10,876,420
4	Gross proceeds in reserve funds	2	4	2	1
5	Capitalized interest from proceeds				
6	Proceeds in refunding escrows	15,028,591	47,503,693	12,796,588	10,661,480
7	Issuance costs from proceeds	433,943	338,853	315,593	214,939
8	Credit enhancement from proceeds				
9	Working capital expenditures from proceeds				
10	Capital expenditures from proceeds	25,042,005		21,264,400	
11	Other spent proceeds		334	13,554	
12	Other unspent proceeds			945,661	
13	Year of substantial completion	2014	2016		2017

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?	X		X		X			X
15	Were the bonds issued as part of an advance refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?	X		X			X	X	
16	Has the final allocation of proceeds been made?	X		X			X	X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

Part III Private Business Use

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X				
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X				

Part III Private Business Use (Continued)

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		X		X				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?	X			X				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?	X							
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	0 %		0 %					
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶	0 %		0 %					
6	Total of lines 4 and 5	0 %		0 %					
7	Does the bond issue meet the private security or payment test?		X		X				
8a	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 issued?		X		X				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of.								
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X					

Part IV Arbitrage

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		X
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X		X		X		X
b	Exception to rebate?		X		X		X		X
c	No rebate due?	X		X		X		X	
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?		X		X		X		X
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		X
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was the hedge terminated?								

Part IV Arbitrage (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X		X
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		X		X		X		X
7	Has the organization established written procedures to monitor the requirements of section 148? . . .	X		X		X		X	

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
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 if self-remediation is not available under applicable regulations?	X		X		X		X	

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

Return Reference	Explanation
DATE REBATE COMPUTATION PERFORMED	ISSUER NAME: CUMBERLAND COUNTY MUNICIPAL AUTHORITY DATE THE REBATE COMPUTATION WAS PERFORMED: 06/30/2020 ISSUER NAME: CUMBERLAND COUNTY MUNICIPAL AUTHORITY DATE THE REBATE COMPUTATION WAS PERFORMED: 03/31/2020 ISSUER NAME: CUMBERLAND COUNTY MUNICIPAL AUTHORITY DATE THE REBATE COMPUTATION WAS PERFORMED: 02/15/2020 ISSUER NAME: CUMBERLAND COUNTY MUNICIPAL AUTHORITY DATE THE REBATE COMPUTATION WAS PERFORMED: 12/27/2019 ISSUER NAME: CUMBERLAND COUNTY MUNICIPAL AUTHORITY DATE THE REBATE COMPUTATION WAS PERFORMED: 02/27/2020

Return Reference	Explanation
SCHEDULE K, PART II, LINE 3	TOTAL PROCEEDS OF EACH ISSUE DIFFER FROM THE ISSUE PRICE DUE TO ACCRUED INTEREST RECEIVED AT CLOSING, INVESTMENT EARNINGS ON FUNDS HELD BY THE TRUSTEE, OR A COMBINATION THEREOF.

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
▶ Attach to Form 990.
▶Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
DICKINSON COLLEGE

Employer identification number
23-1365954

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased Yes	(g) Defeased No	(h) On behalf of issuer Yes	(h) On behalf of issuer No	(i) Pool financing Yes	(i) Pool financing No
A	CUMBERLAND COUNTY MUNICIPAL AUTHORITY	23-6003119	230614MQ9	02-27-2018	10,806,732	REFINANCING		X		X		X

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired								
2	Amount of bonds legally defeased								
3	Total proceeds of issue	10,803,922							
4	Gross proceeds in reserve funds	1							
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows	10,690,354							
7	Issuance costs from proceeds	113,567							
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds								
11	Other spent proceeds								
12	Other unspent proceeds								
13	Year of substantial completion	2018							
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?	X							
15	Were the bonds issued as part of an advance refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X						
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?								
2	Are there any lease arrangements that may result in private business use of bond-financed property?								

Part III **Private Business Use** (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?								
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?								
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶								
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶								
6	Total of lines 4 and 5								
7	Does the bond issue meet the private security or payment test?								
8a	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 issued?								
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of.								
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?								

Part IV **Arbitrage**

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X						
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X						
b	Exception to rebate?		X						
c	No rebate due?	X							
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?		X						
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was the hedge terminated?								

Part IV Arbitrage (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		X						
7	Has the organization established written procedures to monitor the requirements of section 148?	X							

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
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 if self-remediation is not available under applicable regulations?	X							

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

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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.
▶Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
DICKINSON COLLEGE

Employer identification number
23-1365954

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art	X	2	171,990	APPRAISED VALUE
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	64	850,553	FAIR MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (____________)				
26 Other ▶ (____________)				
27 Other ▶ (____________)				
28 Other ▶ (____________)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29	0

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		No
b If "Yes," describe the arrangement in Part II.			
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a	Yes	
b If "Yes," describe in Part II.			
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, COLUMN (B):	THE NUMBER OF CONTRIBUTIONS REPORTED IN PART I, COLUMN (B) IS BASED ON THE NUMBER OF DONATIONS TO THE COLLEGE, AS OPPOSED TO THE NUMBER OF ITEMS DONATED.
PART I, LINE 32B:	MORGAN STANLEY'S BROKERAGE FIRM PROCESSES AND SELLS STOCK GIFTS RECEIVED BY THE COLLEGE.

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
DICKINSON COLLEGE

Employer identification number
23-1365954

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART V, LINE 1A	THE TOTAL NUMBER OF FORMS SUBMITTED INCLUDES 1098-T (2,810), 1099-K (1), 1099-MISC (348), AND 1099-R (31).

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART I, LINE 6	1,296 INDIVIDUALS PROVIDED VOLUNTEER SERVICES FOR THE COLLEGE ON A PART-TIME BASIS DURING FISCAL YEAR 2019-20. IN ADDITION TO MEMBERS OF THE BOARD OF TRUSTEES, THE DICKINSON VOLUNT EER NETWORK INCLUDES OPPORTUNITIES IN ADMISSIONS, ADVANCEMENT, COLLEGE RELATIONS AND THE C AREER CENTER.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	THE BOARD OF TRUSTEES CREATED A TASK FORCE ON BOARD STRUCTURE TO REVIEW THE STRUCTURES OF SELECTED PEER AND ASPIRANT INSTITUTIONS AND MAKE RECOMMENDATIONS INFORMED BY BEST PRACTICE S IN BOARD GOVERNANCE, INPUT FROM TRUSTEES AND SENIOR STAFF, AND THE COLLEGE'S STRATEGIC F RAMEWORK AND PRIORITIES. AFTER DETAILED AND CAREFUL CONSIDERATION, THE TASK FORCE MADE REC OMMENDATIONS FOR A NEW PERFORMANCE-BASED COMMITTEE STRUCTURE THAT GOES BEYOND BASIC FIDUCI ARY RESPONSIBILITIES. THIS STRUCTURE INCLUDES GOALS AND KEY PERFORMANCE INDICATORS FOR EAC H COMMITTEE ALONG WITH ADDITIONAL TRAINING FOR TRUSTEES AND LEADERSHIP TRAINING FOR CHAIRS AND VICE CHAIRS. IN MAY 2020, THE BOARD OF TRUSTEES VOTED TO APPROVE THE RECOMMENDATIONS MADE BY THE TASK FORCE AND THE BY-LAWS WERE AMENDED TO REFLECT CHANGES TO THE BOARD SIZE (FROM 25-50 MEMBERS TO 28-40 MEMBERS), COMMITTEE STRUCTURE AND COMMITTEE RESPONSIBILITIES.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 IS PREPARED BY THE ASSISTANT CONTROLLER IN CONSULTATION WITH VARIOUS DEPARTME NTS ON CAMPUS. THE DRAFT 990 IS PRESENTED TO THE AVP OF FINANCE AND THE VP FOR FINANCE AND ADMINISTRATION, ALONG WITH THE COLLEGE'S TAX REVIEWERS AT KPMG LLP. UPON COMPLETION OF TH E REVIEW AND ASSOCIATED REVISIONS, THE DRAFT 990 IS REVIEWED WITH THE BOARD OF TRUSTEES CO MMITTEE ON ENTERPRISE RISK MANAGEMENT VIA CONFERENCE CALL (AN ELECTRONIC COPY OF THE DRAFT IS PROVIDED TO EACH SUBCOMMITTEE MEMBER PRIOR TO THE CALL). THE FINAL DRAFT 990 IS THEN P ROVIDED TO ALL VOTING MEMBERS OF THE BOARD VIA THE TRUSTEE WEBSITE BEFORE FILING.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	EACH TRUSTEE, OFFICER, OR DESIGNATED PERSON IS EXPECTED TO REPORT PROMPTLY TO THE PRESIDEN T OF THE COLLEGE OR TO THE CHAIRMAN OF THE BOARD OF TRUSTEES THE EXISTENCE OF ANY BUSINESS RELATIONSHIP OR INTEREST, AS IT ARISES, WHICH ACTUALLY OR POTENTIALLY INVOLVES OR MAY APP EAR TO INVOLVE A CONFLICT OF INTEREST. EACH TRUSTEE, OFFICER AND DESIGNATED PERSON IS ASKE D TO SIGN A STATEMENT OF DISCLOSURE REFLECTING HIS OR HER AWARENESS AND UNDERSTANDING OF T HE COLLEGE'S STATEMENT OF POLICY ON CONFLICTS OF INTEREST, AND COMPLIANCE WITH IT, ON AN A NNUAL BASIS. DESIGNATED PERSONS INCLUDE, BUT ARE NOT LIMITED TO, KEY EMPLOYEES OF THE COLL EGE AS REPORTED ON FORM 990. EACH ACTUAL OR POTENTIAL CONFLICT SHALL BE ADDRESSED ON A CAS E-BY-CASE BASIS IN CONTEXT OF THE PERTINENT FACTS. NO CONTRACT OR TRANSACTION BETWEEN THE COLLEGE AND ONE OR MORE OF ITS TRUSTEES, OFFICERS OR DESIGNATED PERSONS SHALL BE VOID OR V OIDABLE SOLELY FOR SUCH REASON AS LONG AS ONE OF THE FOLLOWING CONDITIONS EXIST: 1. WHERE THE NATURE OF THE CONFLICT IS SUCH THAT THE INDIVIDUAL INVOLVED IS NOT ABLE TO DISCLOSE TH E DETAILS THEREOF WITHOUT BREACHING OTHER CONFIDENCES, HE MUST, UPON NOTICE TO THE PRESIDE NT OF THE COLLEGE OR THE CHAIRMAN OF THE BOARD OF TRUSTEES, REMOVE HIMSELF FROM ALL MEETIN GS, DISCUSSIONS, DELIBERATIONS AND ACTIONS AT WHICH THE MATTER IS CONSIDERED; 2. THE MATER IAL FACTS AS TO SUCH RELATIONSHIP OR INTEREST, AND AS TO THE CONTRACT OR TRANSACTION, ARE DISCLOSED OR ARE KNOWN TO THE BOARD AND THE BOARD IN GOOD FAITH AUTHORIZES THE CONTRACT OR TRANSACTION BY THE AFFIRMATIVE VOTES OF A MAJORITY OF THE DISINTERESTED TRUSTEES, EVEN TH OUGH THE DISINTERESTED TRUSTEES ARE LESS THAN A QUORUM; OR 3. THE CONTRACT OR TRANSACTION IS FAIR AS TO THE COLLEGE AS OF THE TIME IT IS AUTHORIZED, APPROVED OR RATIFIED BY THE BOA RD. COMMON OR INTERESTED TRUSTEES MAY BE COUNTED IN DETERMINING THE PRESENCE OF A QUORUM A T A MEETING OF THE BOARD OF TRUSTEES WHICH AUTHORIZES A CONTRACT OR TRANSACTION. WHEN IT I S CONCLUDED THAT A CONFLICT ACTUALLY OR POTENTIALLY EXISTS, AND THE ABOVE PROCESS TO ADDRE SS THE CONFLICT HAS NOT BEEN FOLLOWED, ACTION MAY INCLUDE SUSPENSION IN WHOLE OR IN PART O F THE INDIVIDUAL'S DUTIES WITH THE COLLEGE FOR SUCH PERIOD OF TIME AND/OR AS TO SUCH MATTE RS AS MAY BE DEEMED APPROPRIATE BY THE BOARD OF TRUSTEES, OR REQUESTING THE RESIGNATION OF THE INDIVIDUAL FROM THE BOARD OR FROM THE OFFICE OR EXCLUDING THE INDIVIDUAL WITH THE CON FLICT FROM ALL MEETINGS, DISCUSSIONS, DELIBERATIONS, ACTIONS OR VOTES RELATED TO THE SUBJE CT OF THE CONFLICT.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE BOARD OF TRUSTEES SUBCOMMITTEE ON EXECUTIVE COMPENSATION (THE "SUBCOMMITTEE") HOLDS A CONFERENCE CALL ON AN ANNUAL BASIS TO REVIEW THE TOTAL COMPENSATION PACKAGES FOR THE PRESI DENT AND SENIOR OFFICERS OF THE COLLEGE. PRIOR TO THE CALL, SUBCOMMITTEE MEMBERS ARE PROVI DED WITH COMPARATIVE COMPENSATION DATA FROM TWO SEPARATE HIGHER EDUCATION EXECUTIVE COMPEN SATION SURVEYS. THE SUBCOMMITTEE REVIEWS THE SURVEYS AND DISCUSSES A PROPOSED COMPENSATION PACKAGE FOR THE PRESIDENT (THE PRESIDENT PROPOSES COMPENSATION PACKAGES FOR SENIOR OFFICE RS). THE SUBCOMMITTEE'S RECOMMENDATIONS ARE PRESENTED TO THE BOARD OF TRUSTEES EXECUTIVE C OMMITTEE FOR APPROVAL DURING THE SPRING BOARD MEETINGS. UPON APPROVAL, A LETTER FROM THE B OARD CHAIR IS SENT TO THE AVP FOR HUMAN RESOURCE SERVICES TO CONFIRM THE APPROVED COMPENSA TION FOR THE PRESIDENT AND SENIOR OFFICERS FOR THE UPCOMING FISCAL YEAR BEGINNING JULY 1. THE AVP FOR HUMAN RESOURCE SERVICES MAINTAINS THE ORIGINAL COPY OF THE COMPENSATION LETTER , ALONG WITH ALL OTHER INFORMATION PROVIDED TO THE SUBCOMMITTEE IN SUPPORT OF ITS REVIEW. MINUTES ARE DOCUMENTED FOR BOTH THE CALL AND THE MEETING.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 18	FORM 1023, 990 AND 990-T ARE MADE AVAILABLE UPON REQUEST. FORM 990 IS ALSO AVAILABLE ON WWW.GUIDESTAR.ORG.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE COLLEGE'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS A RE MADE AVAILABLE UPON REQUEST. IN ADDITION, THE COLLEGE'S AUDITED FINANCIAL STATEMENTS AR E POSTED ON THE DICKINSON COLLEGE WEBSITE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART X	CERTAIN RECLASSIFICATIONS HAVE BEEN MADE TO FISCAL YEAR 2019 AMOUNTS TO CONFORM WITH CLASSIFICATIONS IN FISCAL YEAR 2020.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9:	CHANGE IN SETTLEMENT RECEIVABLE 1,852,320. CHANGE IN SPLIT INTEREST ANNUITY LIABILITIES -483,084.

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

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.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
DICKINSON COLLEGE

Employer identification number
23-1365954

Part I **Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) DICKINSON IN ENGLAND LIMITED 371 UNTHANK ROAD NORWICH NR4 7QG UK 98-1548498	EDUCATIONAL INSTITUTION FOR STUDY ABROAD PROGRAMS	UK	628,337	0	DICKINSON COLLEGE

Part II **Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
(1)L'ASSOCIATION DICKINSON EN FRANCE 0 40 R DU JAPON TOULOUSE 31400 FR 33-1566091	HIGHER EDUCATION	FR			DICKINSON COLLEGE	Yes	
(2)SANDIA FOUNDATION 6211 SAN MATEO BLVD NE SUITE 100 ALBUQUERQUE, NM 87109 85-6009907	FOUNDATION	NM	501(C)(3)	LINE 12D, III-O	N/A		No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes	(i) No
(1)CHARITABLE REMAINDER TRUST (5)	ANNUITY	PA		T					No
(2)POOLED INCOME FUND (1)	ANNUITY	PA		T					No
(3)PERPETUAL TRUST (3)	PERPETUAL TRUST	PA		T					No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

			Yes	No
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			
1	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of **(i)** interest, **(ii)**annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to related organization(s)	1b		No
c	Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d	Loans or loan guarantees to or for related organization(s)	1d		No
e	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1f		No
g	Sale of assets to related organization(s)	1g		No
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1i		No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l	Performance of services or membership or fundraising solicitations for related organization(s)	1l		No
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
o	Sharing of paid employees with related organization(s)	1o		No
p	Reimbursement paid to related organization(s) for expenses	1p	Yes	
q	Reimbursement paid by related organization(s) for expenses	1q	Yes	
r	Other transfer of cash or property to related organization(s)	1r		No
s	Other transfer of cash or property from related organization(s)	1s		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(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 512-514)	**(e)** Are all partners section 501(c)(3) organizations?		**(f)** Share of total income	**(g)** Share of end-of-year assets	**(h)** Disproprtionate allocations?		**(i)** Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	**(j)** General or managing partner?		**(k)** Percentage ownership
				Yes	**No**			**Yes**	**No**		**Yes**	**No**	

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. (see instructions).

Return Reference	Explanation