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) 51145 Form

SCANNED DEC 2 0 2010

Department of the Treasury

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation)

OMB No 1545-0047 Open to Public

Inter	mal Revenue Servi	ice	► The organization may have to use a copy of this return to satisfy state	reporting require	ments	Inspection
<u> </u>	For the 2009 cal	lendar ye	ar, or tax year beginning , and ending			
В	Check if applicable	Please	C Name of organization		D Emplo	yer identification number
П.	Address change	use IRS	Midland College Foundation			
≍	Name change	label or print or	Doing Business As		23-	7315067
님	Name change	type.	Number and street (or PO box if mail is not delivered to street address)	Room/suite	E Telepho	one number
Ш	Initial return	See	3600 N. Garfield			-684-7851
\Box	Termination	Specific	Crty or town, state or country, and ZIP + 4		G Gross recei	4 045 054
一	Amended return	Instruc- tions.	Midland, TX 79705		O Closs leach	<u> </u>
=			•		H/a\ ta thua	a group return for
Ш	Application pending	r Name	and address of pnncipal officer			· — —
					affiliates H(b) Are all	affiliates
		ĺ			indude	
_		 			If "No,"	attach a list. (see instructions)
	Tax-exempt status		501(c) (3) ◄ (insert no) 4947(a)(1) or 527			
	Website: ▶ N					exemption number
	Type of organization	X Cor		rear of formation 1	973	M State of legal domicile TX
<u> P</u>	Part I Su	ımmar	У			
	1 Briefly de	escribe th	e organization's mission or most significant activities			
a)	Midl	and C	College Foundation, Inc. is a non-profit organiz	zation est	ablishe	ed
Governance	to p	rovic	le support for the educational goals of Midland	College a	nd its	
Ë	stud	lents.				
Š	2 Check the	is box 🕨	If the organization discontinued its operations or disposed of more than 25%	of its net assets		
Ó	3 Number of	of voting	members of the governing body (Part VI, line 1a)		3	23
ŝ	4 Number	of indepe	endent voting members of the governing body (Part VI, line 1b)		4	23
Activities &		•	employees (Part V, line 2a)		5	0
Ė			volunteers (estimate if necessary)		6	25
⋖			ated business revenue from Part VIII, column (C), line 12		7a	
	1		siness taxable income from Form 990-T, line 34		7b	0
	D Net diller	aleu bus	miess taxable moone non rom sao-t, mie 34	Pnor Yea		Current Year
	8 Contributi	ions and	grants (Part VIII, line 1h)	3,182	2,230	1,234,339
Revenue			revenue (Part VIII, line 2g)	•		<u> </u>
Ve	· ·		e (Part VIII, column (A), lines 3, 4, and 7d)	-6,734	1.115	3,033,532
8			art VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-/	
			dd lines 8 through 11 (must equal Part VIII, column (A), line 12)	-3,551	1.885	4,267,871
	1		r amounts paid (Part IX, column (A), lines 1–3)		0,510	1,719,299
				3,12	7,310	1,113,233
	1		r for members (Part IX, column (A), line 4)			
es			mpensation, employee benefits (Part IX, column-(A),-lines-5-10)		+	
Expenses	1		raising fees (Part IX, column (A), line 11e)	 		
ă			expenses (Part IX, column (D), line 25)		2 001	106 500
ш	17 Other exp	penses (Part IX, column (A), lines 11a–11d, 11f–24n		3,801	196,782
	18 Total exp	enses A		3,444		1,916,081
	19 Revenue	less exp	enses Subtract line 18 from line 12	-6,996		2,351,790
Net Assets or Fund Balances			x, line 16) CG, JT	Beginning of Cur		End of Year
Salar	20 Total ass	•		<u> 26,953</u>		29,089,132
age A	21 Total liab	•	art X, line 26)		8,811	322,717
			d balances Subtract line 21 from line 20	26,414	1,625	28,766,415
<u> P</u>	art II Si	gnatur	e Block //			
	Und	der penalti	es of perjury, I declare that I have examined this return, including accompanying schedules and strue, correct and emploies Declaration of preparer (other than officer) is based on all inform	d statements, and t	to the best of	my knowledge
	_	i beller, il	is true, correct and campical declaration of preparer (other than officer) is based on all inform	ation of which prep	alei ilas ally	Kilowieuge
Sig	jn 🎉	√ :			<u> </u>	118/12
He	re 🖊 🔻	Signatur	and office.		Date	/ /
		Ý.	Kick Bender	<u> </u>		
		Type or	print name and title			
	Pre	parer's	Dater (Check	ıf	Preparer's identifying number
Pai	ICI sigr	nature	P CVV	(a) self-	ed ▶ □	(see instructions) P00295886
	eparer's 💳	1 3.1.0.3	EIN ▶	85-0214336		
Us		n's name				
		elf-employ Iress, and	<i>"</i>		Phone	432-683-1835
Mari			um with the preparer shown above? (see instructions)		no 🕨	
_			work Reduction Act Notice, see the separate Instructions.			Yes No Form 990 (2009)
U	THEATH MEL BI	u raper	work neutration Act notice, see the separate instructions.			run 330 (2009)

May the IRS discuss this return with the preparer shown above? (see instructions) For Privacy Act and Paperwork Reduction Act Notice, see the separate Instructions. DAA

Form	990 (2009	Midland College F	oundation	23-7315067	Page 2
_Pa	irt III	Statement of Program Servi	ce Accomplishments		
1	Bnefly de	scribe the organization's mission			
				profit organization	
			he educational goa	ls of Midland Collec	ge and its
S	tuden	ts.			
		· · · · · · · · · · · · · · · · · · ·			···
2	Did the o	rganization undertake any significant p	rogram services during the year which	n were not listed on	
	-	Form 990 or 990-EZ?			Yes X No
		describe these new services on Sched			
3	Did the o	rganization cease conducting, or make	significant changes in how it conduct	s, any program	□
	services?				Yes X No
		describe these changes on Schedule C			
4		the exempt purpose achievements for			
				red to report the amount of grants and	
	allocation	s to others, the total expenses, and re	venue, if any, for each program service	ce reported	
	(C- 4-) (F	- alvalina areata of the) (Davianus	•
4a	(Code) (Expenses \$	including grants of \$) (Revenue	\$
4h	(Code) (Expenses \$	including grants of \$) (Revenue	\$
	(0020	/ (Exponed t	moduling grants of \$, (Notoliae	,
4c	(Code) (Expenses \$	including grants of \$) (Revenue	\$
4d		gram services (Describe in Schedule			
	(Expense		uding grants of \$ 1,719,	299) (Revenue \$)
<u>4e</u>	Total pro	gram service expenses >	1,719,299		

			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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11		х
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI		1	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more		1	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		[
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more		ł	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			ĺ
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X		Ì	
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	1		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any		Ī -	
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	L	х
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	<u></u>	х
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	<u></u>	х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х
		Form	990	(2009

Form 990 (2009) Midland College Foundation
WRart VV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
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			7.7
	employees? If "Yes," complete Schedule J	_23		<u> </u>
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	1		x
	24b through 24d and complete Schedule K. If "No," go to line 25	24a 24b	\vdash	
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24c		
	to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	244		
ZJa	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
h	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		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete		'	
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<u> </u>	<u> X</u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			.
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	31		X_
32	Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	131		
32	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u>"</u>		-
-	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	"		
•	III, IV, and V, line 1	34		_X_
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
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		X
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
		Form	990	(2009)

1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmitation of U.S. Information Returns. Enter 4-0 if not applicable 1		outchens regarding outcr the range and rax compliance				V	
U.S. Information Returns. Enter -0- if not applicable Enter the number of Forms WSA Childred in line 1s Enter-0- if not applicable Did the organization conney, with biackup withholding rules for reportable payming (perhaphing) wanning to prove winners? 2a. Enter the number of emotyloses reported on Form WS. Transmittal of Wage and Tax. Statements, field for the calending verse enting with or whethin they ser covered by this return. 2b. If a least one is reported on line 2a, dut 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 efficit this return (see instructions) 3a. Dut he organization have unrelited business gross income of \$1,000 or more during the year covered by this return. 3b. If Yes, has it filed a Form 980-T for this year? If Yo., *provide an explanation in Schedule O 3c. If Yes, has the did a Form 980-T for this year? If Yo., *provide an explanation in Schedule O 3c. If Yes, has the a Form 980-T for this year? If Yo., *provide an explanation in Schedule O 3c. If Yes, has the a Form 980-T for this year? If Yo., *provide an explanation in Schedule O 3c. If Yes, has the a Form 980-T for this year? If Yo., *provide an explanation in Schedule O 3c. If Yes, the new name of the foreign country • • • • • • • • • • • • • • • • • •	1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1	Ī		Yes	No
be Enter the number of Forms W.3G included in line 1s Enter -0-of not applicable gamma (particulation comply who bedow) withouting number of employees reported in line 1s. Enter -0-of not applicable gamma (particulation comply who bedow) were not as a series of the careful particulation comply who bedow who have a contribution of the series of the careful particulation of the series of the careful particulation of the series of the series of the careful particulation of the series of th		·	1a	1			
c Dut the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (paming) without pix to prize withholding rules for reportable yaming (paming) without pix to prize without pix and the prize with the pix and the prize with the pix and the pi	ь	••		-		1	
gaming (gamthing) winnings to prize winners? 2 Either the number of employees reported on Form W-3, Transmittal of Winge and Tax Satements, field for the calendar year ending with or within the year covered by the return 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 the return (see instructions) 3 Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3 If Y'es, 'his at filed a Form 990-7 for this year? If 'No,' provide an explanation in Schedule O 4 A ray time during the cliendar 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 accounts? 5 Was the organization a party to a prohibited tax sheller transaction at any time during the tax year? 5 Was the organization a party to a prohibited tax sheller transaction? 5 Was the organization aparty to a prohibited tax sheller transaction? 5 Was the organization aparty to a prohibited tax sheller transaction? 5 Was the organization aparty to a prohibited tax sheller transaction? 5 Was the organization aparty to a prohibited tax sheller transaction? 5 Was the organization that it was or a a party to a prohibited tax deleter transaction? 6 Was the organization transplace party and the organization that fives or a party to a prohibited tax deleter transaction? 6 Does the organization transplace party and the organization that fives or a party to a prohibited tax deleter transaction? 6 Does the organization relations that may receive deductible contributions under section 170(c). 8 Different parts of the organization transplace party as a contribution and party for goods and services provided to the payor? 9 Organization that may receive deductible contributions under section 170(c). 10 If the organizat		• • • • • • • • • • • • • • • • • • • •	able				
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Note. If the sum of lenes 1a and 2a is greater than 250, you may be required to e-file this return (see instructors) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3countly over, a financial account in a foreign country (such as a bank account, or other financial accounts) 3countly? 3a X 3b If "Yes," enter the name of the foreign country ► 3ce the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 3country? 3c Was the organization applied that was or is a party to a prohibited tax shelter transaction? 3c Was the organization applied tax shelter transaction at any time during the tax year? 3c Was the organization problem to grain the form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 3c If "Yes," the five face for bid, off the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 3c If "Yes," dot the organization inclide with every solicitation an express statement that such contributions or gifts were not tax deductable? 3c If "Yes," dot the organization inclide with every solicitation an express statement that such contributions or gifts were not tax deductable? 3c If "Yes," dot the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 3c If "Yes," dot the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 3c If "Yes," differed the number of Forms \$282 filed during the year 3c If "Yes," entitle the nu			2a	0			
an instructions) about the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? by this return? by the return? cover, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? by If "Yes," reter the name of the foreign country cover, a financial account in a foreign country cover, a financial account cove	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	Ì	
3a		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see					
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For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g X For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make and istribution to a donor, donor advisor, or related person? 9b Did the organization section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	f						
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Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? Ita Section 4947(a)(1) non-exempt charitable trusts received or accrued during the year. 12a					7h		x
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Section 501(c)(12) organizations. Enter a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11a 11b 12a 5 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12a 12b	а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
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b If "Yes," enter the amount of tax-exempt interest received or accrued during the year		· · · · · · · · · · · · · · · · · · ·		L			
	I2a			I	12a	 	
	b_	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			655	<u> </u>

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and Part VI for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No 23 1a Enter the number of voting members of the governing body 23 b Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 X 2 any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct X supervision of officers, directors or trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? X 5 Did the organization become aware during the year of a material diversion of the organization's assets? X 6 6 Does the organization have members or stockholders? 7a Does the organization have members, stockholders, or other persons who may elect one or more members X of the governing body? X 7b b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X Яa a The governing body? X Each committee with authority to act on behalf of the governing body? 8b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached X at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Does the organization have local chapters, branches, or affiliates? 10a X If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b Has the organization provided a copy of this Form 990 to all members of its governing body before filing the X form? 11 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give X nse to conflicts? 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." X describe in Schedule O how this is done 12c X Does the organization have a written whistleblower policy? 13 13 Does the organization have a written document retention and destruction policy? 14 X 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official 15a X 15b Other officers or key employees of the organization 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 X with a taxable entity during the year? 16a b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 19 policy, and financial statements available to the public 20 State the name, physical address, and telephone number of the person who possesses the books and records of the 3600 N. Garfield, organization > Rick Bender 432-684-7851 TX 79705 Midland

DAA

Form 990 (2009)

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

X Check this box if the organization	•	sate a	any (curre	nt o	fficer,	dire	ctor, or trustee				
(A) Name and Title	(B) Average			(Check	C) call t	hat ap	ply)	(D) Reportable	(E) Reportable	(F) Estimated amount of		
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations		
Barbara O'Shaughn	essy	x						0	0	0		
Beverly Pevehouse		х						0	0	0		
Bill Kleine Secretary		x		х				0	0	0		
Cadell Liedtke		x						0	0	0		
Carole Warren		x						0	0	0		
Charles Spence		х						0	0	0		
Clarance Scharbau	er III	x						0	0	0		
Steve Thomas, Ph.	D.	x						0	0	0		
Dr. Arnulfo Carra	sco	x						0	0	0		
Dr. Glenn Rogers		x		x				0	0	0		
Dr. Gregory Barth		x						0	0	0		
H. Joseph de Comp	iegne	x						0	0	0		
Jack E. Brown	-	x						0	0	0		
Joann Foster		х						0	0	0		
Linda Cowden		x						0	0	0		
Terry Wilkinson		x						0	0	0		
L. Decker Dawson		x						0	0	0		

Part VII Section A. Officers	, Directors, Trus	tees	, Ke	y En	ploy	yees,	an	d Highest Compensated E	mployees (continued)		
(A) Name and Title	(B) Average hours per		_	chec		• • •	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of		
	week	Indwidual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations	
Marie Hall		x		-				0	0		0
Ralph Way		х						0	0		0
Richard McMillan President		x		x				0	0		0
Spencer Beal		x						0	0		0
T.B. O'Brien		x						0	0		0
Tevis Herd, Esq.		x						0	0		0
William Marshall		x						0	0		0
Mike Black		x						0	0		0
								-			
1b Total							<u>,</u>	1 1 1 1 1 1 1 1 1 1	00.000		
Total number of individuals (inc reportable compensation from to			0 tn	ose	liste	abo	ove)	who received more than \$1			
3 Did the organization list any for								e, or highest compensated		Yes	No X
employee on line 1a? If "Yes," For any individual listed on line the organization and related or	1a, is the sum o	f rep	ortat	ole ca	omp	ensat	lion			3	_
individual 5 Did any person listed on line 1								·		4	Х
services rendered to the organi		comp	olete	Sch	edule	e J fo	or su	ich person		5	X
Section B. Independent Contractor Complete this table for your five compensation from the organization.	e highest compei	nsate	ed in	depe	nder	nt cor	ntrac	tors that received more than	n \$100,000 of		
	(A) business address							Descrip	(B) tion of services	(C) Compensati	bon
									·		
Total number of independent comore than \$100,000 in comper	•	-				to th	ose	listed above) who received		0	
DAA									-	Form 990	(2009)

Pa	ırt V	<u>III Staten</u>	nent of Reve	nue						<u> </u>
							(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
							Total Tevenue	exempt function	business revenue	excluded from tax under sections
								revenue		512, 513, or 514
និន	1a	Federated can	npaigns	1a						
Contributions, gifts, grants and other similar amounts	b	Membership di	ues	1b						
S, E	C	Fundraising ev	vents	1c						
뺥	d	Related organi	zations	1d						
Si'S,	e	Government grants	(contributions)	1e			·			
it i	f	All other contribution								
들을		and similar amounts	not included above	1f	1,	234,339				
Por	g	Noncash contribution	ns included in lines 1a-	1f	\$			i		
	h	Total. Add line	es_1a-1f			<u> </u>	1,234,339			
JE .						Busn Code				
eve	2a							· · · · · · · · · · · · · · · · · · ·		
e Se	b								 -	
Ξ̈́	С								· · · · · · · · · · · · · · · · · · ·	
งั	d					<u> </u>				
Ta.	e	All -4b				—				
Program Service Revenue	i		am service reven	ue						
_	<u>g</u> 3	Total. Add line	ome (including d	nadona	la interce	t and				
	3	other similar a	•	ivideiid	15, 11116165	t, and	-726,169			-726,169
	4		nvestment of tax-	ovomo	t bond om	accode	720,103			720,103
	5	Royalties	ivesument or tax-	ехепір	t bolla pic	Diceeus -			······································	
	, J	royanes	(ı) Real		(n) F	Personal				
	6a	Gross Rents	(7.102		(,					
	b	Less rental exps				•				
	C	Rental inc or (loss)								
	d	Net rental inco	me or (loss)		· ·	•				
	7a	Gross amount from	(i) Securities		(11)	Other			· · · · · · · · · · · · · · · · · · ·	
		sales of assets other than inventory	3,759,		· · · · ·					
	ь	Less cost or other	, , , , ,							
	_	basis & sales exps								
	С	Gain or (loss)	3,759,	701						
	d	Net gain or (los			•	•	3,759,701	3,759,701		
_	8a	Gross income fro	om fundraising even	rts	•				•	
Other Revenue		(not including \$								
eve		of contributions re	eported on line 1c)							
æ		See Part IV, line	18	а						
the	b	Less direct ex	penses	ь						
Ç	С	Net income or	(loss) from fundr	aising	events	•				
	9a	Gross income fro	m gaming activities							
		See Part IV, line	19	а						
	b	Less direct ex	penses	ь						
	С	Net income or	(loss) from gamin	ng actr	vities	<u> </u>				
	10a	Gross sales of	inventory, less	i						
		returns and alk	owances	а						
	b	Less cost of g	oods sold	b						
	С		(loss) from sales	of inve	entory					
		Miso	ellaneous Revenue			Busn. Code				
	11a						_			
	b						· <u> </u>			
	C					<u> </u>				
,	d	All other revenu				L				
	е	Total. Add line				>				
	12	Total Revenue	e. See instruction	<u>s</u>		<u> </u>	4,267,871	3,759,701	0	-726,169

Form 990 (2009) Statement of Functional Expenses Part IX

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b, 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 governments and		<u> </u>	gantra expenses	
•	organizations in the U.S. See Part IV, line 21	1,719,299	1,719,299		
2	Grants and other assistance to individuals in	, <u> </u>			
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
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 salanes and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management				
b	Legal				
c d	Accounting Lobbying				
u	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties		_		
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization		-		
23	Insurance				
•	Other courses there is				
24	Other expenses. Itemize expenses not				
	covered above (Expenses grouped together and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)				
а	Community Enrichment Prog	112,302		112,302	·
b	Operating Expenses	63,252		63,252	
c	Promotional Expenses	21,228		21,228	
d		== <i>L</i> ===	-	,	
e					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	1,916,081	1,719,299	196,782	
26	Joint costs. Check here ▶ ☐ If following				
	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation				

	•	(Ralance Sheet	21011	23-7313067		Page II
	art)	Balance Sheet		(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing		251,499	1	1,144,396
	2	Savings and temporary cash investments		2,006,376	2	846,135
	3	Pledges and grants receivable, net		7,857,135	3	6,455,799
	4	Accounts receivable, net		4		
	5	Receivables from current and former officers, directors, tr				
	•	employees, and highest compensated employees Comple	•		i	
		Schedule L			5	
	6	Receivables from other disqualified persons (as defined u				
	•	4958(f)(1)) and persons described in section 4958(c)(3)(B				
		Part II of Schedule L	, complete		6	
ξŝ	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
ĕ	9	Prepaid expenses and deferred charges		3,250	9	32,500
		Land, buildings, and equipment cost or		-,	Ť	
		other basis Complete Part VI of Schedule D	10a			
	h	Less accumulated depreciation	10b		10c	
	11	Investments—publicly traded securities	1001	16,835,176	11	20,610,302
	12	Investments—other securities See Part IV, line 11		20/000/2/0	12	20/020/002
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		26,953,436	16	29,089,132
_	17	Accounts payable and accrued expenses		12,264	17	5,614
	18	Grants payable		526,547	18	317,103
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
G	21	Escrow or custodial account liability Complete Part IV of		21		
Liabilities	22	Payables to current and former officers, directors, trustees				
Ξ		employees, highest compensated employees, and disqual	· •			
ia		persons Complete Part II of Schedule L			22	
_	23	Secured mortgages and notes payable to unrelated third p	parties		23	
	24	Unsecured notes and loans payable to unrelated third par			24	
	25	Other liabilities Complete Part X of Schedule D		•	25	
	26	Total liabilities. Add lines 17 through 25		538,811	26	322,717
S		Organizations that follow SFAS 117, check here ▶ 🖁	and			
ces		complete lines 27 through 29, and lines 33 and 34.	_		- 1	
lan	27	Unrestricted net assets		3,457,593	27	5,637,293
Balano	28	Temporanly restricted net assets		9,715,132	28	9,696,138
Þ	29	Permanently restricted net assets		13,241,900	29	13,432,984
Fund		Organizations that do not follow SFAS 117, check her	e ▶ □			
-		and complete lines 30 through 34.				
S	30	Capital stock or trust principal, or current funds		30		
set	31	Paid-in or capital surplus, or land, building, or equipment f		31		
S	32	Retained earnings, endowment, accumulated income, or o			32	
Net Assets or	33	Total net assets or fund balances		26,414,625	33	28,766,415
ž	34	Total liabilities and net assets/fund balances		26,953,436	34	29,089,132

29,089,132 Form 990 (2009)

Form	990 (2009) Midland College Foundation 23-7315067		Pa	ge 12
Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990 Cash X 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		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of		1	
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			•
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both		Ì	
	X Separate basis Consolidated basis Both consolidated and separate basis			
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		X
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

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

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. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Midland College Foundation

Employer identification number 23-7315067

Pa	art I	Reas	on for Public Charity	Status (All organizations	must co	omplete	this p	art)S	ee ins	tructio	ns		
The	orgar	nization is not	a private foundation because	it is (For lines 1 through 11, che	ck only or	ne box)							
1		A church, cor	nvention of churches, or asso	ociation of churches described in	section 1	70(b)(1)(A	A)(i).						
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)												
3	П	A hospital or	a cooperative hospital service	e organization described in section	on 170(b)	(1)(A)(iii).							
4	П		•	in conjunction with a hospital de-				(A)(iii).	Enter th	ne hosp	ıtal's name.		
	_	city, and state	•					,		•	•		
5	X	•	_	a college or university owned or	operated	hy a nov	emmenta	al unit de	scribed	ın			
•	5 X 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)												
_													
_													
7													
			section 170(b)(1)(A)(vi). (Co										
8	Н	A community	trust described in section 17	'0(b)(1)(A)(vi). (Complete Part II)								
9	Ш	An organizati	on that normally receives (1)	more than 33 1/3 % of its support	ort from co	ontribution	s, memb	ership fe	es, and	gross			
		receipts from	activities related to its exemp	ot functions—subject to certain ex	ceptions,	and (2) n	o more t	han 33 1	1/3 % o	f its			
		support from	gross investment income and	d unrelated business taxable inco	me (less	section 51	11 tax) fr	om busi	nesses				
	_	acquired by the	he organization after June 30	, 1975 See section 509(a)(2). (0	Complete	Part III)							
10	Ш	An organization	on organized and operated e	xclusively to test for public safety	See sec	tion 509(a)(4).						
11		An organization	on organized and operated ex	clusively for the benefit of, to per	rform the	functions	of, or to	carry ou	t the				
		purposes of o	one or more publicly supporte	ed organizations described in sect	tion 509(a)(1) or se	ction 509	9(a)(2) S	See sec	tion			
		509(a)(3). Ch	eck the box that describes th	e type of supporting organization	and com	plete lines	11e thr	ough 11	h				
		а П Туре	i b Type ii	c Type III–Functional	lly integra	ted	ď	Typ	e III-Otl	her			
е			·	inization is not controlled directly			or more						
-		-		and other than one or more public		• •		•		ction			
		•	section 509(a)(2)		,								
f			` ` ` `	mination from the IRS that it is a	Type I Ty	ne II or T	vna III s	unnortin					
•			check this box	imator nom tie ing tiat it is a	турст, ту	pe ii, oi i	ype iii s	apporting	y				
						6 46-							لسا
g		-	· · · · · · · · · · · · · · · · · · ·	on accepted any gift or contribution	on irom ar	iy or the							
		following per										<u> </u>	1
		(i) A persor	who directly or indirectly cor	ntrols, either alone or together wit	th persons	describe	d in (ii)					Yes	No
		and (III) I	below, the governing body of	the supported organization?							11g(i)		ļ
		(ii) A family	member of a person describe	ed in (i) above?							11g(iı)	ļ	ļ
		(iii) A 35% c	ontrolled entity of a person de	escribed in (i) or (ii) above?							11g(iii	<u>) </u>	<u> </u>
h		Provide the f	ollowing information about the	e supported organization(s)									
(i)	Name	of supported	(ii) EIN	(iii) Type of organization	(iv) is the o	organization		ou notify		is the	(vii) Am	ount of	
	orga	anization		(described on lines 1–9		sted in your		nization in of your	organizati	on in col zed in the	sup	port	
				above or IRC section (see instructions))	governing	document?		port?		S ?			
				(000 morrosso,)	Yes	No	Yes	No	Yes	No			
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b	33 1/3 % support test—2008. 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—2009. 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 IV how the	_
	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	▶ [
b	10%-facts-and-circumstances test—2008. 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 IV 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	▶ _

	and IL j					1				
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										
Sec	tion C. Computation of Public Su	pport Percentage								
15	Public support percentage for 2009 (line 8,	column (f) divided by line 13, column ((f))	• • •	15	%				

15	Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2008 Schedule A, Part III, line 15	16	%
Sac	ction D. Computation of Investment Income Percentage		

Sec	Section D. Computation of investment income Percentage									
17	Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	9/							
18	Investment income percentage from 2008 Schedule A. Part III. line 17	18	9/							

19a	33 1/3 % support tests—2009. 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—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and	
	line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization	▶ □

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

Page 4

Schedule A (Form 990 or 990-EZ) 2009 Midland College Foundation 23-7315067

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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Open to Public

Inspection

OMB No 1545-0047

▶ Attach to Form 990. ▶ See separate instructions.

Employer identification number Name of the organization 23-7315067 Midland College Foundation Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (dunng year) 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? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c 2d d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the penodic monitoring, inspection, handling of Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section Yes No 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, 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" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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 relating to these items Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

	•									
Sche		ollege Founda			<u>3-7315067 </u>	Page 2				
Pa	rt III Organizations Maintaining (Collections of Art, F	<u>listorical Treasu</u>	ires, or Ot	ther Similar Asse	ets (continued)				
3	Using the organization's acquisition, accession, collection items (check all that apply)	and other records, check a	iny of the following th	at are a signi	ificant use of its					
а	Public exhibition	d 🗍 Loan o	r exchange programs	;						
b	Scholarly research	e Other								
c	Preservation for future generations	2 <u> </u>				-				
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in									
_	Part XIV									
5	During the year, did the organization solicit or reassets to be sold to raise funds rather than to be					Yes No				
Pa	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part									
	IV, line 9, or reported an amo	ount on Form 990, F	art X, line 21.							
1a	Is the organization an agent, trustee, custodian	or other intermediary for c	ontributions or other a	assets not						
	ıncluded on Form 990, Part X?					Yes No				
b	If "Yes," explain the arrangement in Part XIV an	d complete the following ta	ble							
						Amount				
C	Beginning balance				1c					
d	Additions during the year				1d					
е	Distributions during the year				1e					
f	Ending balance									
2a	Did the organization include an amount on Form 990, Part X, line 21?									
b	If "Yes," explain the arrangement in Part XIV									
	rt V Endowment Funds. Comple	te if organization an	swered "Yes" to	Form 990.	, Part IV, line 10.					
		(a) Current year	(b) Pnor year	(c) Two years	s back (d) Three years	back (e) Four years back				
1a	Beginning of year balance	15,277,437	21,522,040							
	Contributions	342,165	460,909							
С	Net investment earnings, gains,	·								
_	and losses	3,309,112	-5,874,657							
d	Grants or scholarships	309,298	830,855							
	Other expenditures for facilities		,							
-	and programs									
f	Administrative expenses									
	End of year balance	18,619,416	15,277,437							
2	Provide the estimated percentage of the year er									
	Board designated or quasi-endowment	20.52 %								
	Permanent endowment 72.15 %									
	Term endowment ▶									
				4						
Sa	Are there endowment funds not in the possession	on of the organization that	are neid and adminis	tered for the		Ves I Ne				
	organization by					Yes No				
	(i) unrelated organizations					3a(i) X				
	(ii) related organizations					3a(ii) X				
	If "Yes" to 3a(ii), are the related organizations lis	•				3b				
	Describe in Part XIV the intended uses of the or			Ded V. I	40					
<u>ra</u>	rt VI Investments—Land, Buildin	1				40.5				
	Description of investment	(a) Cost or other basis	(b) Cost or other	er	(c) Accumulated	(d) Book value				
	 	(investment)	basis (other)		depreciation					
	Land		 			y				
	Buildings		 							
C	Leasehold improvements	I	1	j						

Schedule D (Form 990) 2009

d Equipment e Other

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

Schedule D (Form 990) 2009 Midland College Founda	tion	23-7315067	Page 3
Part VII Investments—Other Securities. See Form 990			
(a) Description of security or category	(b) Book value	(c) Method of valuati	on
(including name of security)		Cost or end-of-year mark	et value
Financial derivatives			
Closely-held equity interests			
Other			
			
-			
			., .
	-		
			
	-		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			-
Part VIII Investments—Program Related. See Form 990). Part X. line 13		
(a) Description of investment type	(b) Book value	(c) Method of valuati	on
,, ,		Cost or end-of-year mark	
-		····	
9" - 7	*		
	-	-	
			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	-		
Part IX Other Assets. See Form 990, Part X, line 15.			
(a) Description		· · · · · · · · · · · · · · · · · · ·	(b) Book value
(-)			(-,
	.		
· · · · · · · · · · · · · · · · · · ·			÷.
* ***			
** * 			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)		•	
Part X Other Liabilities. See Form 990, Part X, line 25			
1 (a) Description of liability	(b) Amount		
Federal income taxes		1	
ostal moone and		1	
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Total (Column (b) must acual Form 000 Part V and (D) to 000		4	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	Interior for a series of the series of the	that manta the	
2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's liability for uncertainty and provided FIN 48	auon s ililandai statements	s mat reports the	

Sche	dule D (Form 990) 2009 Midland College Foundation	23-73150	<u> 57 </u>	Page 4					
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	Audited Financial Staten	nents						
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	4,267,871					
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	1,916,081					
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	2,351,790					
4	Net unrealized gains (losses) on investments		4						
5	Donated services and use of facilities		5						
6	Investment expenses		6						
7	Prior period adjustments		7						
8	Other (Describe in Part XIV)		8						
9	Total adjustments (net) Add lines 4 through 8		9						
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		10	2,351,790					
	rt XII Reconciliation of Revenue per Audited Financial Statemer	nts With Revenue per Re	turn						
1	Total revenue, gains, and other support per audited financial statements		1	4,267,871					
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12								
	Net unrealized gains on investments	2a							
ь	Donated services and use of facilities	2b	7						
	Recovenes of pnor year grants	2c	-						
d	Other (Describe in Part XIV.)	2d	7 I						
e	Add lines 2a through 2d								
3	Subtract line 2e from line 1		3	4,267,871					
A		1 (-	-/					
•	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	4a							
a	Investment expenses not included on Form 990, Part VIII, line 7b	4b	⊣ ∣						
b	Other (Describe in Part XIV)	40 1	4c						
C	Add lines 4a and 4b		5	4,267,871					
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) rt XIII Reconciliation of Expenses per Audited Financial Stateme	nte With Evnonese nor		4,201,011					
		ints With Expenses per	1	1,916,081					
1	Total expenses and losses per audited financial statements		+++	1,910,001					
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	- !						
С	Other losses	2c	- 1						
	Other (Describe in Part XIV)	2d	\dashv \downarrow \uparrow						
_	Add lines 2a through 2d		2e	1 016 001					
3	Subtract line 2e from line 1) [3	1,916,081					
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1							
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	- 1						
	Other (Describe in Part XIV)	4b	⊣						
	Add lines 4a and 4b		4c	1 01 6 001					
_	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	1,916,081					
	rt XIV Supplemental Information								
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines	1a and 4, Part IV, lines 1b							
and 2	b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines	2d and 4b Also complete							
	art to provide any additional information								
_P	art V, Line 4 - Intended Uses for Endowment	<u>Funds</u>							
D.	ert V line 4								
	Part V, line 4								
_p	providing resources for general budget assistance, scholarships and								
_physical_plant_improvements									

Sched	ule C	(Fo	m 990	200	9	Mi	.dla	ınd	Co	lle	ge	Fo	und	ati	.on					23	-73	150	67					Page	5
Sched Par	t XI	V	Sup	olen	ent	al l	nfor	natio	on (d	contin	ued)																	_
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SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

Part

Grants and Other Assistance to Organizations,

OMB No 1545-0047

≗ □ Open to Public Inspection 2009 Yes X Employer identification number 23-7315067 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Complete if the organization answered "Yes" on Form 990, Part IV, lines 21 or 22. Governments, and Individuals in the United States ▶ Attach to Form 990. the selection critena used to award the grants or assistance?

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. General Information on Grants and Assistance Midland College Foundation

		2011					
ered "Yes" to e than \$5,000. Use	(h) Purpose of grant or assistance	Support Midland Coll					H C
anization answ t received mor	(g) Description of non-cash assistance						
olete if the organion one recipien	(f) Method of valuation (book, FMV, appraisal, other)						
ted States. Compred this box if n	(e) Amount of non-cash assistance						
and Organizations in the United States. Complete if the organization answered "Yes" to received more than \$5,000. Check this box if no one recipient received more than \$5,000 is space is needed	(d) Amount of cash grant (e) Amount of non-cash assistance	1,719,299					
Organizatived mo	(c) IRC section if applicable						
vernments and cipient that recent additional spa	Nia (d)	75-1403958					ganizations
Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule 1-1 (Form 990) if additional space is needed	(a) Name and address of organization or government	Midland College District					Enter total number of section 501(c)(3) and government organizations
Part II	-	Midland					2 Enter

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA 3 Enter total number of other organizations

Schedule I (Form 990) 2009

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Schedule I (F	Schedule I (Form 990) 2009 Midland College Foundation	ege Foundation		23-7315067		, Page 2
Part III	Grants and Other Assistance to Individuals in t Use Part IV and Schedule I-1 (Form 990) if addit	to Individuals in the (Form 990) if addition	the United States, Com tonal space is needed.	plete if the organizat	the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Itonal space is needed.	
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV	Supplemental Information. Complete this part t	omplete this part to pr	rovide the information	n required in Part I, li	to provide the information required in Part I, line 2, and any other additional information.	nal information.

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SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009

Open to Public Inspection

Name of the organization

Midland College Foundation

Employer identification number 23-7315067

Form 990, Part III, Line 4d - All Other Achievements

Payments made to Midland College for the operating budget

and fund Midland College scholarships.

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990 A copy of the Form 990 was provided to each voting member prior to its filing with the IRS.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
Require written statement from Officers, Directors and Trustees.

Form 990, Part VI, Line 15a - Compensation Process for Top Official Resolve not to compensate Officers, Directors or Executives.

Form 990, Part VI, Line 15b - Compensation Process for Officers Resolve not to compensate Other Officers or key employees.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

51145 Midland College Foundation

23-7315067 FYE: 12/31/2009

Federal Statements

Taxable Interest on Investments

Description	 Amount	Unrelated Business Code	Exclusion Code	Postal Code	Acquired after 6/30/75
	\$ -726,169		14		
Total	\$ -726,169				