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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 black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

2009

Open to Public Inspection

For the 2009 calendar year, or tax year beginning 8/01 **, 2009, and ending** 7/31 **, 2010**

B Check if applicable.
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Termination
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See specific instructions.

C
MEXICAN AMERICAN CATHOLIC COLLEGE, INC.
3115 WEST ASHBY PLACE
SAN ANTONIO, TX 78228

D Employer Identification Number
74-1712528

E Telephone number
(210) 732-2156

G Gross receipts $ 3,315,673.

F Name and address of principal officer
Same As C Above

H(a) Is this a group return for affiliates? ☐ Yes ☒ No
H(b) Are all affiliates included? ☐ Yes ☐ No
If 'No,' attach a list. (see instructions)

I Tax-exempt status ☒ 501(c) (3) ◄ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ► www.maccsa.org

H(c) Group exemption number ► 0928

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ►

L Year of Formation 1972

M State of legal domicile TX

Part I Summary

1 Briefly describe the organization's mission or most significant activities: The College has as it's mission "To empower and educate leaders for service in a culturally diverse church and society by offering a bi-literate, multi-clutural formation program that can lead to a Bachelor of Arts and a Master of Arts degree in Pastoral Ministry". In

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	17
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	15
5	Total number of employees (Part V, line 2a)	5	31
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

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		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	471,288.	688,385.
9	Program service revenue (Part VIII, line 2g)	500,486.	747,314.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-724,555.	206,557.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	153,006.	114,085.
12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	400,225.	1,756,341.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,048,125.	1,117,196.
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25) ► 144,886.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	915,054.	767,726.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,963,179.	1,884,922.
19	Revenue less expenses. Subtract line 18 from line 12	-1,562,954.	-128,581.

		Beginning of Year	End of Year
20	Total assets (Part X, line 16)	6,674,010.	6,709,676.
21	Total liabilities (Part X, line 26)	165,750.	153,305.
22	Net assets or fund balances. Subtract line 21 from line 20	6,508,260.	6,556,371.

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

► Arturo Chavez — Signature of officer — Date: 6/14/11

► Mr. Arturo Chavez, Ph.D. — President & CEO
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ►	Michael Garza, CPA	Date: 6/14/2011	Check if self-employed ► ☐
Preparer's identifying number (see instructions)	P00543101		
Firm's name (or yours if self-employed), address, and ZIP + 4 ►	Garza, Preis & Co. 8415 Speedway Dr. San Antonio, TX 78230	EIN ► 74-2425513	Phone no ► (210) 341-0577

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

917-21 17

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:

See Schedule O

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 exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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: [redacted]) (Expenses $ 1,442,344. including grants of $) (Revenue $ 774,949.)

Educational programs which focus on pastoral, leadership and language development. These programs provide special educational training and research relating to the culture and ethos of Hispanics in the United States. The programs promote cultural awareness, multi-cultural leadership, community building, spiritual formation, pastoral ministry, and stewardship. Participants in these programs totaled 683 for the year ended July 31, 2010

4b (Code: [redacted]) (Expenses $ including grants of $) (Revenue $)

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

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

4e Total program service expenses ► 1,442,344.

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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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	X	
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		X
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	X	
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	X	
	• Did the organization report an amount for land, buildings and equipment in Part X, line 10? *If 'Yes,' complete Schedule D, Part VI*			
	• 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*			
	• 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.*			
	• 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.*			
	• Did the organization report an amount for other liabilities in Part X, line 25? *If 'Yes,' complete Schedule D, Part X*			
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organizaiton's liability for uncertain tax positions under FIN 48? If *'Yes,' complete Schedule D, Part X*			
12	Did the organization obtain separate, independent audited financial statement 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 statement for the tax year? *If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional* (Yes / No)	12 A		X
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		X
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		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the 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		X
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	X	
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		X
20	Did the organization operate one or more hospitals? *If 'Yes,' complete Schedule H*	20		X

Part IV 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		X
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		X
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, and that was issued after December 31, 2002? *If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If 'Yes,' complete Schedule L, Part I*	25a		X
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		X
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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee 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 transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If 'Yes,' complete Schedule L, Part IV.*	28a	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
c	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	X	
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, Part I*	31		X
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		X
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		X
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	

Part V Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a 16		
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		X
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 31		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* this return. (see instructions)			
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	3a		X
b	If 'Yes' has it filed a Form 990-T for this year? *If 'No,' provide an explanation in Schedule O*	3b		
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		X
b	If 'Yes,' enter the name of the foreign country: ► _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	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?	6a		X
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not 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	X	
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d	If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
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?	8		
9	**Sponsoring organizations maintaining donor advised funds.**			
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make any 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 other 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		

Part VI **Governance, Management and Disclosure** *For each 'Yes' response to lines 2 through 7b below, and 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
1a	Enter the number of voting members of the governing body	17		
b	Enter the number of voting members that are independent	15		
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? See Schedule O		X	
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?			X
4	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	Does the organization have members or stockholders?			X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?			X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?		X	
b	Each committee with authority to act on behalf of the governing body?		X	
9	Is there any officer, director or 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*			X

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?		X
b	If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?		X
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O		
12a	Does the organization have a written conflict of interest policy? *If 'No,' go to line 13*	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? *If 'Yes,' describe in Schedule O how this is done* See Schedule O	X	
13	Does the organization have a written whistleblower policy?	X	
14	Does the organization have a written document retention and destruction policy?	X	
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	X	
b	Other officers of key employees of the organization See Schedule O	X	
	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?		X
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. Disclosures

17 List the states with which a copy of this Form 990 is required to be filed ► None

18 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 ☒ Upon request

19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Schedule O

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization.

► Clemencia Guevara, Finance Dir 3115 West. Ashby Place San Antonio TX 78228 (210) 732-

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

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

☐ Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Rev. Michael D. Pfeifer, O Chairman	2	X		X				0.	0.	0.
Mr. Arturo Chavez, PhD President & CEO	55	X		X	X			100,666.	0.	8,604.
Rev. Patrick Flores Chair Emeritus	1	X						0.	0.	0.
Ms. Barbara Aldave Vice Chair	2	X		X				0.	0.	0.
Sr. Theresa McGrath, CCVI Sec./Treasurer	2	X		X				0.	0.	16,537.
Mr. Daniel Lizarraga Director	1	X						0.	0.	0.
Ms. Maria Rodriguez Carden Director	1	X						0.	0.	0.
Rev. Len Brown, CMF Director	1	X						0.	0.	0.
Rev. Warren Brown, OMI Director	1	X						0.	0.	0.
Rev. Oscar Cantu, STL Director	1	X						0.	0.	0.
Rev. Daniel Flores, S.T.D. Director	1	X						0.	0.	0.
Sr. Sandra Prucha, RSM Director	1	X						0.	0.	0.
Rev. Patrick Zurek, D.D. Director	1	X						0.	0.	0.
Rev. Jose H. Gomez Ex-Officio Dir.	1	X	X					0.	0.	0.
Rev. Arturo Cepeda Ex-Officio Dir.	1	X	X					0.	0.	45,170.
Rev, Dan Paul Borlik, CM Director	1	X						0.	0.	0.
Ms. Ana Novoa Director	1	X						0.	0.	0.

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
John Bruce, CPA Director	1	X						0.	0.	0.
1b Total ►								100,666.	0.	70,311.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ► 1

		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*		X
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*		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? *If 'Yes,' complete Schedule J for such person*		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of Services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ► 0

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	688,385.			
	g Noncash contribns included in lns 1a-1f:	$	402,969.			
	h **Total.** Add lines 1a-1f		688,385.			
PROGRAM SERVICE REVENUE		Business Code				
	2a Tuition and Fees	611600	476,117.	476,117.		
	b Room and Board	611600	246,718.	246,718.		
	c Translations/Homiletics	611600	22,079.	22,079.		
	d Consulting Services	611600	2,400.	2,400.		
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a-2f		747,314.			
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts)		77,731.			77,731.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
		(i) Real / (ii) Personal				
	6a Gross Rents	17,834.				
	b Less: rental expenses					
	c Rental income or (loss)	17,834.				
	d Net rental income or (loss)		17,834.			17,834.
		(i) Securities / (ii) Other				
	7a Gross amount from sales of assets other than inventory	1,615,369.				
	b Less: cost or other basis and sales expenses	1,486,543.				
	c Gain or (loss)	128,826.				
	d Net gain or (loss)		128,826.			128,826.
	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18	a 61,177.				
	b Less: direct expenses	b 9,361.				
	c Net income or (loss) from fundraising events		51,816.			51,816.
	9a Gross income from gaming activities. See Part IV, line 19	a				
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
	10a Gross sales of inventory, less returns and allowances	a 91,063.				
	b Less: cost of goods sold	b 63,428.				
	c Net income or (loss) from sales of inventory		27,635.	27,635.		
	Miscellaneous Revenue	Business Code				
	11a OTHER	900099	15,431.			15,431.
	b ROYALTIES/PRINTS	900099	1,369.			1,369.
	c					
	d All other revenue					
	e **Total.** Add lines 11a-11d		16,800.			
	12 **Total revenue.** See instructions		1,756,341.	774,949.	0.	293,007.

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) but are not required to complete columns (B), (C), and (D).

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 governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in 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	179,611.	108,869.	35,371.	35,371.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages	781,302.	535,725.	195,328.	50,249.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	94,623.	57,126.	27,964.	9,533.
10 Payroll taxes	61,660.	40,138.	15,844.	5,678.
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	34,058.	25,751.	7,595.	712.
d Lobbying				
e Prof fundraising svcs See Part IV, ln 17				
f Investment management fees				
g Other				
12 Advertising and promotion	6,665.	1,996.		4,669.
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	17,552.	10,074.	7,362.	116.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	10,372.	9,499.	873.	
20 Interest	1,833.		1,833.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	193,467.	160,937.	28,237.	4,293.
23 Insurance	35,158.	29,268.	5,113.	777.
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.)				
a Utilities & Telephone	105,341.	31,516.	73,210.	615.
b Consultants/Contract Labor	82,005.	75,431.	6,574.	
c Equipment and Furnishings	48,281.	30,657.	16,944.	680.
d Maintenance and Grounds	43,418.		42,988.	430.
e Contributed Inventory	30,534.	30,534.		
f All other expenses	159,042.	294,823.	-167,544.	31,763.
25 Total functional expenses. Add lines 1 through 24f	1,884,922.	1,442,344.	297,692.	144,886.
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				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
ASSETS	1	Cash – non-interest-bearing	49,088.	1	100,902.
	2	Savings and temporary cash investments		2	596,007.
	3	Pledges and grants receivable, net	87,303.	3	77,028.
	4	Accounts receivable, net	44,050.	4	105,376.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	79,560.	8	35,093.
	9	Prepaid expenses and deferred charges	9,618.	9	12,230.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 6,326,674.			
	b	Less: accumulated depreciation — 10b: 2,718,854.	3,713,857.	10c	3,607,820.
	11	Investments – publicly-traded securities	2,675,534.	11	1,737,775.
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets	15,000.	14	10,000.
	15	Other assets. See Part IV, line 11		15	427,445.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	6,674,010.	16	6,709,676.
LIABILITIES	17	Accounts payable and accrued expenses	54,768.	17	97,000.
	18	Grants payable		18	
	19	Deferred revenue	10,982.	19	7,472.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	100,000.	23	48,833.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	165,750.	26	153,305.
NET ASSETS OR FUND BALANCES		**Organizations that follow SFAS 117, check here ► [X] and complete lines 27 through 29 and lines 33 and 34.**			
	27	Unrestricted net assets	3,715,478.	27	4,499,947.
	28	Temporarily restricted net assets	1,546,294.	28	809,936.
	29	Permanently restricted net assets	1,246,488.	29	1,246,488.
		Organizations that do not follow SFAS 117, check here ► [ ] and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, and equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	6,508,260.	33	6,556,371.
	34	Total liabilities and net assets/fund balances	6,674,010.	34	6,709,676.

Part XI Financial Statements and Reporting

		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		X
b Were the organization's financial statements audited by an independent accountant?	2b	X	
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	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:			
☒ 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.	3b		

SCHEDULE A (Form 990 or 990-EZ)

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.** ► **See separate instructions.**

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization	Employer identification number
MEXICAN AMERICAN CATHOLIC COLLEGE, INC.	74-1712528

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 11, 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.)

3 ☐ A hospital or 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 organization that normally receives: (1) more than 33-1/3 % 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 33-1/3 % 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.)

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

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I **b** ☐ Type II **c** ☐ Type III – Functionally integrated **d** ☐ Type III– Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box . . . . . ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g (i)		
(ii) a family member of a person described in (i) above?	11g (ii)		
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	11g (iii)		

h Provide the following information about the supported organizations

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document? Yes	(iv) No	(v) Did you notify the organization in col. (i) of your support? Yes	(v) No	(vi) Is the organization in col (i) organized in the U S ? Yes	(vi) No	(vii) Amount of Support
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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')						
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						
4 **Total.** Add lines 1-through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 **Total support.** Add lines 7 through 10						

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

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 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15	Public support percentage from 2008 Schedule A, Part II, line 14	15	%

16a **33-1/3 support test – 2009.** If the organization did not check the box on line 13, and the 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 – 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 ► ☐

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants.')						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a 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, 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 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 yr beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 inline 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 IV.)						
13 **Total support.** (add lns 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 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	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2009** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2008** Schedule A, Part III, line 17.	18	%

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 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 Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. 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, lines 6, 7, 8, 9, 10, 11, or 12.
► Attach to Form 990. ► See separate instructions

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

MEXICAN AMERICAN CATHOLIC COLLEGE, INC.

Employer identification number

74-1712528

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate 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 may 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' to 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 pleasure)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of certified historic structure

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 8/17/06	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 easement it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, 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 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 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 ► $ 402,969.
(ii) Assets included in Form 990, Part X ► $ 402,969.

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:

a Revenues included in 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 XIV.

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 organization answered 'Yes' to 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 XIV 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? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIV.

Part V Endowment Funds Complete if organization answered 'Yes' to 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	2,548,692.	3,150,649.			
b Contributions	2,516.	6,728.			
c Net investment earnings, gains, and losses	383,249.	-256,265.			
d Grants or scholarships		11,670.			
e Other expenditures for facilities and programs	725,000.	340,750.			
f Administrative expenses					
g End of year balance	2,209,457.	2,548,692.			

2 Provide the estimated percentage of the year end balance held as:

a Board designated or quasi-endowment ► 35.89 %
b Permanent endowment ► 56.00 %
c Term endowment ► _____ %

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)	X	
(ii) related organizations	3a(ii)		X
b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book Value
1a Land		200,300.		200,300.
b Buildings		4,944,395.	1,794,173.	3,150,222.
c Leasehold improvements		293,141.	95,715.	197,426.
d Equipment		368,657.	342,087.	26,570.
e Other		520,181.	486,879.	33,302.
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)*			►	3,607,820.

Part VII Investments—Other Securities See Form 990, Part X, line 12. N/A

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market 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) N/A

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
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
Library Collection	427,445.
Total. *(Column (b) must equal Form 990, Part X, col (B), line 15)* ►	427,445.

Part X Other Liabilities (See Form 990, Part X, line 25)

(a) Description of Liability	(b) Amount
Federal Income Taxes	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25)* ►	

2. FIN 48 Footnote In Part XIV, 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.

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

1	Total revenue (Form 990, Part VIII,column (A), line 12)	1,756,341.
2	Total expenses (Form 990, Part IX, column (A), line 25)	1,884,922.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	-128,581.
4	Net unrealized gains (losses) on investments	176,692.
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	
9	Total adjustments (net). Add lines 4 through 8	176,692.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9.	48,111.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	2,026,665.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a	176,692.		
b	Donated services and use of facilities	2b	84,271.		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV). See Part XIV	2d	9,361.		
e	Add lines 2a through 2d			2e	270,324.
3	Subtract line 2e from line 1			3	1,756,341.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investments expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,756,341.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	1,978,554.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.				
a	Donated services and use of facilities	2a	84,271.		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV) See Part XIV	2d	9,361.		
e	Add lines 2a through 2d			2e	93,632.
3	Subtract line 2e from line 1			3	1,884,922.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investments expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c (This must equal Form 990, Part I, line 18.)			5	1,884,922.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Part V, Line 4 - Intended Uses Of Endowment Fund

The intended uses of the endowment funds are to provide funding for general operations; specifically to assist and allow the College to develop the curriculum and building of the student body.

Part XIV Supplemental Information *(continued)*

Schedule D, Part XII, Line 2d
Other Revenue Included In F/S But Not Included On Form 990

Gala event expenses	$ 9,361.
Total	$ 9,361.

Schedule D, Part XIII, Line 2d
Other Expenses And Losses Per Audited F/S

Gala event expenses	$ 9,361.
Total	$ 9,361.

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

► **Complete if the organization answered 'Yes' to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.**
► **Attach to Form 990 or Form 990-EZ.**

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
MEXICAN AMERICAN CATHOLIC COLLEGE, INC.

Employer identification number
74-1712528

		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	X	
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	X	
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 had 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 Schedule O (Form 990)	3	X	
The organization by its nature exists to promote the rights, culture and spirituality of Hispanics. The organization is closely alligned with the Roman Catholic Church through the United States Catholic Conference and as such is a champion for the individual civil rights of all individuals regardless of race, gender or religious affiliation.			
4 Does the organization maintain the following?			
a Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	X	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	X	
d Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	
If you answered 'No,' to any of the above, please explain. If you need more space, use Schedule O (Form 990).			
5 Does the organization discriminate by race in any way with respect to:			
a Students' rights or privileges?	5a		X
b Admissions policies?	5b		X
c Employment of faculty or administrative staff?	5c		X
d Scholarships or other financial assistance?	5d		X
e Educational policies?	5e		X
f Use of facilities?	5f		X
g Athletic programs?	5g		X
h Other extracurricular activities?	5h		X
If you answered 'Yes,' to any of the above, please explain. If you need more space, use Schedule O (Form 990)			
6a Does the organization receive any financial aid or assistance from a governmental agency?	6a		X
b Has the organization's right to such aid ever been revoked or suspended?	6b		X
If you answered 'Yes,' to either line 6a or line 6b, please explain on Schedule O (Form 990)			
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 Schedule O (Form 990).	7	X	

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' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.
► Attach to Form990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
MEXICAN AMERICAN CATHOLIC COLLEGE, INC.

Employer identification number
74-1712528

Part I **Fundraising Activities.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 17. Form 990EZ 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.

- [X] Mail solicitations
- [ ] Internet and email solicitations
- [ ] Phone solicitations
- [ ] In-person solicitations
- [X] Solicitation of non-government grants
- [ ] Solicitation of government grants
- [X] Special fundraising events

2a Did the organization have 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 [X] No

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

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	(iii) 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
Total . . . ►						0.

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

Part II Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than $15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than $5,000.

		(a) Event #1 Gala Celebrati (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	61,177.			61,177.
	2 Less: Charitable contributions				
	3 Gross income (line 1 minus line 2)	61,177.			61,177.
DIRECT EXPENSES	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	9,361.			9,361.
	10 Direct expense summary. Add lines 4- through 9 in column (d) ►				9,361.
	11 Net income summary Combine lines 3, column (d) and line 10 ►				51,816.

Part III Gaming. Complete if the organization answered 'Yes' to 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 Non-cash 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. Combine lines 1, column (d) and line 7 ►				

		YES	NO
9	Enter the state(s) in which the organization operates gaming activities:		
a	Is the organization licensed to operate gaming activities in each of these states? 9a		
b	If 'No,' explain:		
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a		
b	If 'Yes,' explain.		
11	Does the organization operate gaming activities with nonmembers? 11		
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? 12		

			YES	NO
13 Indicate the percentage of gaming activity operated 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 contact with a third party from whom the organization receives gaming revenue?	15a			
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?	17a			
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► $_____				

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization
MEXICAN AMERICAN CATHOLIC COLLEGE, INC.

Employer identification number
74-1712528

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected? Yes	(c) Corrected? No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 . . . . . ► $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ► $

Part II Loans to and/or From Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization? To	(b) Loan to or from the organization? From	(c) Original principal amount	(d) Balance due	(e) In default? Yes	(e) In default? No	(f) Approved by board or committee? Yes	(f) Approved by board or committee? No	(g) Written agreement? Yes	(g) Written agreement? No
Total . . . . . ► $										

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction $	(d) Description of transaction	(e) Sharing of organization's revenues? Yes	(e) Sharing of organization's revenues? No
Rev. Arturo Cepeda	Ex-Officio Board M	45,170.	Purchase of Services		X
Sr. Theresa McGrath, CCVI	Board Member	16,537.	Purchase of Services		X

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.

OMB No 1545-0047

2009

Open To Public Inspection

Name of the organization
MEXICAN AMERICAN CATHOLIC COLLEGE, INC.

Employer identification number
74-1712528

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art–Works of art				
2 Art–Historical treasures	X	1	402,969.	Sale of Compar
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				
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

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

Part III Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

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.**

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization
MEXICAN AMERICAN CATHOLIC COLLEGE, INC.

Employer identification number
74-1712528

Form 990, Part III, Line 1 - Organization Mission

The College has as it's mission "To empower and educate leaders for service in a culturally diverse church and society by offering a bi-literate, multi-clutural formation program that can lead to a Bachelor of Arts and a Master of Arts degree in Pastoral Ministry". In accomplishing this mission the College offers a number of educational classes, workshops and symposiums which focus on pastoral and multicultural training. Further the College engages in research projects which parallel and compliment its mission.

Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directors, Etc.

The Roman Catholic Archdiocese of San Antonio is related directly to the Assumption Seminary of San Antonio. Each of these entities holds an ex-oficio seat, through the Archbishop of San Antonio and the Seminary's Rector, on the Board of Directors of the Mexican American Catholic College. Further, various members of the organization's board are members of a Roman Catholic religious order of priests or nuns. In some instances members of the organization's board belong to the same religious order.

Form 990, Part VI, Line 11 - Form 990 Review Process

The Federal Form 990 is prepared by the external CPA firm which performs the annual audit of the organization's financial statements. Following the preparation of the 990 it is provided to the organization's Finance Director for review. Following this review it is submitted to the organization's President/CEO for review and signature. If time permits, following the close of this process and the filing due date of the return, the return is submitted to the organization's Finance committee for review. Once reviewed and agreed to the return is filed with the Internal Revenue Service.

Name of the organization: MEXICAN AMERICAN CATHOLIC COLLEGE, INC.

Employer identification number: 74-1712528

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Annually each Responsible Person (officer, employee, or member of the Board of Directors of the organization) shall complete a disclosure form identifying any relationships, positions, or circumstances in the Responsible Person is involved that he or she believes could contribute to a Conflict of Interest. Each new Responsible Person to the organization shall be required to review the policy and acknowledge in writing that he or she has done so.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process for Officers & Key Employees

The President and CEO is hired by the board of directors of the organization. From this hiring process a written employment contract is extended to the candidate for acceptance. The contract provides for a specific compensation amount and benefits as well as a contractual employment term. Leading up to the close of the contract term the board will review the individuals performance during tenure of employment and extend a new contract or allow the contract to lapse. The board of directors will determine the need to interview new candidates for this position. The President and CEO performs the hiring of all other staff of the organization.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

All requests for the issuance of these documents must be made in writing to the President and CEO for approval of issuance.

Rental Income Worksheet

Meet. Room/Dormitory, 3115 Ashby SA Tx.

Gross Rental Income	$ 17,834.
Expenses	
Total Expenses	$ 0.
Net Rental Income or Loss	$ 17,834.

Computation of Cost of Goods Sold (Form 990)

1. Inventory at start of year	79,560.
2. Purchases	12,809.
3. Cost of labor	0.
4. Additional 263A costs	0.
5. Other costs	6,152.
6. Total (Add lines 1 through 5)	98,521.
7. Inventory at end of year	35,093.
8. Cost of goods sold (Subtract line 7 from line 6)	63,428.

Form 990, Part IX, Line 24 Other Expenses

	(A) Total	(B) Program Services	(C) Management & General	(D) Fundraising
Accreditation	3,730.	3,730.		
Allocation of Plant/Facility		199,248.	-204,563.	5,315.
Auto Expense	1,018.	414.	604.	
Bank Charges	7,824.	7,722.	102.	
Community Outreach	4,523.	4,523.		
Dues & Subscriptions	8,147.	3,307.	4,215.	625.
Educational Materials	4,168.	4,168.		
Food Service	8,183.	8,183.		
Hospitality	16,920.	16,746.	174.	
Housekeeping Supplies	6,071.	4,838.	1,233.	
Immersion Experience	1,896.	1,896.		
Library Resources	11,829.	11,829.		
MACC Board	1,335.		1,335.	
Miscellaneous	221.	221.		
Office Supplies	13,478.	7,265.	6,213.	
Postage and Shipping	10,718.	4,119.	352.	6,247.
Printing and Publications	15,416.	7,715.	862.	6,839.
Professional Fees	12,558.	3,003.	9,555.	
Public Relations	14,958.	1,987.	3,657.	9,314.
Security	2,954.		2,954.	
Solicitation Expense	2,922.			2,922.
Staff Development	9,779.	3,515.	5,763.	501.
Student Activities	394.	394.		
Vision - Newsletter				
Total	$ 159,042.	$ 294,823.	$ -167,544.	$ 31,763.

Schedule D, Part V
Endownment Funds

	Current Year	Prior Year	Two Yrs. Back	Three Yrs. Back	Four Yrs. Back
Beginning of year balance	2,548,692.	3,150,649.	0.	0.	0.
Contributions	2,516.	6,728.			
Investment earnings (losses)	383,249.	-256,265.			
Grants or scholarships		11,670.			
Expend. for facilities & progs	725,000.	340,750.			
Administrative expenses					
End of year balance	2,209,457.	2,548,692.	0.	0.	0.

Client 00000256 | MEXICAN AMERICAN CATHOLIC COLLEGE, INC. | 74-1712528

6/14/11 03:04PM

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus Pct	Cur 179 Bonus	Special Depr. Allow.	Prior 179/ Bonus/ Sp. Depr.	Prior Dec Bal. Depr.	Salvage /Basis Reductn	Depr. Basis	Prior Depr.	Method	Life	Rate	Current Depr.
Depr. Schedule Only																
Buildings																
39	Building Phase II	3/01/00		3,758,914							3,758,914	1,242,577	S/L	30		125,297
40	Classroom buildings	1/01/99		1,042,105							1,042,105	367,633	S/L	30		34,737
63	Building - Water Treat.	3/23/05		38,299							38,299	5,534	S/L	30		1,277
64	House - 315 Germania	11/05/04		89,315							89,315	14,141	S/L	30		2,977
	Total Buildings			4,928,633		0	0	0	0	0	4,928,633	1,629,885				164,288
Furniture and Fixtures																
9	Wausau Outside Furniture	3/01/00		8,637							8,637	5,712	S/L	15		576
10	Wittigs Receptionist-1st	3/01/00		7,185							7,185	7,185	S/L	7		0
11	Wittigs Adm 1st floor fur	3/01/00		79,351							79,351	79,351	S/L	7		0
12	Wittigs Adm 2nd floor fur	3/01/00		73,391							73,391	73,391	S/L	7		0
13	Wittigs Canteen ffurn	3/01/00		11,205							11,205	11,205	S/L	7		0
14	Dorm furniture	3/01/00		93,122							93,122	93,122	S/L	7		0
15	Victoria uphostered furn	3/01/00		3,709							3,709	3,709	S/L	7		0
16	Bookstore shelves	3/01/00		15,859							15,859	15,859	S/L	7		0
17	Mission refinished furn	3/01/00		11,685							11,685	11,685	S/L	7		0
18	Wittigs filing cabinets	3/01/00		3,577							3,577	3,577	S/L	7		0
19	70 twin mattress dorm	3/01/00		9,945							9,945	9,945	S/L	7		0
20	74 Sierra vertical blind	3/01/00		7,726							7,726	7,726	S/L	7		0
21	80 Lamps-dorm	3/01/00		3,600							3,600	3,600	S/L	7		0
22	Classroom furnishings	1/01/99		121,607							121,607	121,607	S/L	7		0
23	Bookshelves	4/18/97		7,620							7,620	7,620	S/L	7		0
24	Custom wall lights	3/01/00		3,750							3,750	3,750	S/L	7		0

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct.	Cur 179 Bonus	Special Depr. Allow.	Prior 179/ Bonus/ Sp. Depr.	Prior Dec. Bal. Depr.	Salvage /Basis Reductn	Depr. Basis	Prior Depr.	Method	Life	Rate	Current Depr.
25	15 Cabinets-main off	4/28/01		3,286							3,286	3,286	S/L	7		0
26	40 Glass tops for desk	2/06/01		3,087							3,087	3,087	S/L	7		0
27	3 Patio Umbrellas	5/18/01		1,289							1,289	1,289	S/L	7		0
42	MACC Video	12/31/00		6,500							6,500	6,500	S/L	3		0
43	Beyond Borders	1/10/01		10,000							10,000	5,725	S/L	15		667
69	Watson Sarasota Sofa	2/03/06		3,100							3,100	1,550	S/L	7		443
78	Chapel Pews	9/19/08		4,890							4,890	582	S/L	7		699
79	Dorm Mattresses	10/10/08		4,930							4,930	587	S/L	7		704
85	Sofas for Lobby	8/24/09		1,300							1,300		S/L	5		238
86	Lobby Computer Desks	9/03/09		1,100							1,100		S/L	7		144
87	Shelving for Library	10/08/09		12,766							12,766		S/L	7		1,520
88	Shelving/Ref Rm 1670 10	4/09/10		1,928							1,928		S/L	7		92
89	Mattresses for Dorms	1/19/10		2,040							2,040		S/L	7		146
90	Conclave Training Tables	7/16/10		1,996							1,996		S/L	7		0
	Total Furniture and Fixtures			520,181		0	0	0	0	0	520,181	481,650				5,229
	Improvements															
1	Shrine	3/01/00		88,757							88,757	29,343	S/L	30		2,959
2	Archive Filing System	3/01/00		35,644							35,644	17,672	S/L	20		1,782
3	Student Mail Boxes	3/01/00		2,250							2,250	1,488	S/L	15		150
4	In Memory of Bricks	3/01/00		1,976							1,976	1,309	S/L	15		132
5	Stained Glass Windows	3/01/00		19,349							19,349	6,396	S/L	30		645
6	Signage	3/01/00		14,582							14,582	4,820	S/L	30		486
7	Fence	3/01/00		12,586							12,586	4,165	S/L	30		420
8	Shrine Improvements	12/14/00		4,022							4,022	1,161	S/L	30		134
47	Solar Vertical Blinds	6/28/02		1,443							1,443	680	S/L	15		96

Client 00000256 | MEXICAN AMERICAN CATHOLIC COLLEGE, INC. | 74-1712528

6/14/11 03 04PM

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct.	Cur 179 Bonus	Special Depr. Allow.	Prior 179/ Bonus/ Sp. Depr.	Prior Dec. Bal. Depr.	Salvage /Basis Reductn	Depr. Basis	Prior Depr.	Method	Life	Rate	Current Depr.
57	Dorm Door Locks, Viewers	5/31/03		4,639							4,639	1,906	S/L	15		309
60	Telephone cables-Tech Svc	12/01/03		9,400							9,400	3,553	S/L	15		627
66	Concrete Drainage Box	9/01/04		14,502							14,502	2,375	S/L	30		483
67	Asphalt parking lot	9/09/04		8,228							8,228	5,777	S/L	7		1,175
68	Book Store Sign	12/10/04		2,488							2,488	775	S/L	15		166
72	2 Aluminum doors	3/02/06		4,810							4,810	547	S/L	30		160
73	Gate Improvements	11/08/05		3,578							3,578	896	S/L	15		239
74	Red Pavers - Walkway	6/16/06		4,275							4,275	441	S/L	30		143
91	Renovate Guadalupe Center	9/18/09		17,811							17,811		S/L	10		1,484
92	Renovate Plaza	5/28/10		22,227							22,227		S/L	10		370
93	Salazar Dorm Flooring	7/30/10		4,926							4,926		S/L	7		0
94	Community Center Flooring	12/18/09		4,659							4,659		S/L	7		388
95	Renovate Water Softener	7/13/10		5,257							5,257		S/L	7		63
	Total Improvements			287,409		0	0	0	0	0	287,409	83,304				12,411
	Land															
45	Land	1/01/99		200,300							200,300					0
65	Land - 315 Germania	1/15/04		15,762							15,762					0
	Total Land			216,062		0	0	0	0	0	216,062	0				0
	Machinery and Equipment															
28	File Server	3/01/00		5,195							5,195	5,195	S/L	5		0
29	Server software NT	3/01/00		4,239							4,239	4,239	S/L	5		0
30	Computer cabling&install	3/01/00		9,121							9,121	9,121	S/L	7		0
31	Maytag topload washer	3/01/00		3,668							3,668	3,668	S/L	5		0

Client 00000256 | MEXICAN AMERICAN CATHOLIC COLLEGE, INC. | 74-1712528

6/14/11 03.04PM

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct	Cur 179 Bonus	Special Depr. Allow.	Prior 179/ Bonus/ Sp. Depr.	Prior Dec Bal. Depr.	Salvage /Basis Reductn	Depr. Basis	Prior Depr.	Method	Life	Rate	Current Depr.
32	Maytag electric dryers	3/01/00		3,200							3,200	3,200	S/L	5		0
33	Security systems	3/01/00		9,033							9,033	9,033	S/L	7		0
34	Gateway computers	3/01/00		3,061							3,061	3,061	S/L	5		0
35	Language lab equip	8/31/99		78,951							78,951	78,951	S/L	5		0
36	Melin Legend telephone sy	2/28/94		18,971							18,971	18,971	S/L	5		0
37	Bookstore mgr software	3/01/00		14,422							14,422	14,422	S/L	5		0
38	Telephone & Cabling	3/01/00		92,340							92,340	92,340	S/L	7		0
41	Integrater-channel Intern	12/14/00		3,400							3,400	3,400	S/L	5		0
44	Projector	5/29/01		3,245							3,245	3,245	S/L	5		0
46	A/C Computer Room	10/12/01		4,625							4,625	4,625	S/L	7		0
48	POS Cash Reg.	3/06/02		3,695							3,695	3,695	S/L	5		0
49	Computer	2/27/02		1,773							1,773	1,773	S/L	5		0
50	Computer	2/27/02		1,972							1,972	1,972	S/L	5		0
51	Echo Blower & Trim	4/30/02		700							700	700	S/L	7		0
52	Snapper engine - Moelcher	5/31/02		757							757	757	S/L	7		0
53	In Focus LP-500 Projector	3/15/03		2,199							2,199	2,199	S/L	5		0
54	Toshiba Lap Top Computer	3/15/03		1,549							1,549	1,549	S/L	5		0
55	17 Computers 1.8ghz, 256	12/16/02		27,765							27,765	27,765	S/L	5		0
56	2 HPLJ 4200 Printers	12/31/02		2,896							2,896	2,896	S/L	5		0
58	Video	10/15/02		7,500							7,500	7,500	S/L	5		0
59	Development software	7/31/03		4,001							4,001	4,001	S/L	5		0
61	Lucent Legend phone proce	1/15/04		3,420							3,420	2,730	S/L	7		489
62	File server&software	7/15/04		5,515							5,515	5,515	S/L	5		0
70	T-1 connection for dorms	6/06/06		4,631							4,631	4,631	S/L	3		0
71	Lucent Telephone Upgrade	7/20/06		7,404							7,404	3,174	S/L	7		1,058
75	Language Lab Computers	7/31/06		14,006							14,006	8,403	S/L	5		2,801
76	Lawn Tractor	7/31/06		1,962							1,962	840	S/L	7		280

Client 00000256 | MEXICAN AMERICAN CATHOLIC COLLEGE, INC. | 74-1712528

6/14/11 03.04PM

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct.	Cur 179 Bonus	Special Depr. Allow.	Prior 179/ Bonus/ Sp. Depr.	Prior Dec. Bal. Depr.	Salvage /Basis Reductn	Depr. Basis	Prior Depr.	Method	Life	Rate	Current Depr.
77	Air Condition Unit	9/26/08		5,581							5,581	664	S/L	7		797
80	A/C Unit	1/30/08		6,128							6,128	1,313	S/L	7		875
96	Server for Students	4/15/10		3,295							3,295		S/L	5		220
97	A./C Unit for Admin Bldg	7/30/10		6,847							6,847		S/L	7		0
98	A/C Window Units - Office	7/08/10		1,590							1,590		S/L	7		19
	Total Machinery and Equipment			368,657		0	0	0	0	0	368,657	335,548				6,539
	Miscellaneous															
81	Production Media Content	7/31/07		25,000							25,000	10,000	S/L	5		5,000
	Total Miscellaneous			25,000		0	0	0	0	0	25,000	10,000				5,000
	Total Depreciation			6,345,942		0	0	0	0	0	6,345,942	2,540,387				193,467
	Grand Total Depreciation			6,345,942		0	0	0	0	0	6,345,942	2,540,387				193,467

Form **8868**
(Rev April 2009)

Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► **File a separate application for each return.**

OMB No 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box . . . . . ► [X]
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I **Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension – check this box and complete Part I only . . ► [ ]

All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns

Electronic Filing *(e-file)*. Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit *www.irs.gov/efile* and click on *e-file for Charities & Nonprofits.*

Type or print	Name of Exempt Organization	**Employer identification number**
	MEXICAN AMERICAN CULTURAL CENTER, INC.	74-1712528
File by the due date for filing your return See instructions.	Number, street, and room or suite number If a P O box, see instructions.	
	3115 WEST ASHBY PLACE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	SAN ANTONIO, TX 78228	

Check type of return to be filed (file a separate application for each return):

[X] Form 990	[ ] Form 990-T (corporation)	[ ] Form 4720
[ ] Form 990-BL	[ ] Form 990-T (section 401(a) or 408(a) trust)	[ ] Form 5227
[ ] Form 990-EZ	[ ] Form 990-T (trust other than above)	[ ] Form 6069
[ ] Form 990-PF	[ ] Form 1041-A	[ ] Form 8870

- The books are in the care of ► Dr. Arturo Chavez, PHD

  Telephone No. ► (210) 732-2156 FAX No. ►
- If the organization does not have an office or place of business in the United States, check this box . . . . . ► [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ► [ ]. If it is for part of the group, check this box. ► [ ] and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 3/15, 20 11, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

► [ ] calendar year 20___ or

► [X] tax year beginning 8/01, 20 09, and ending 7/31, 20 10.

2 If this tax year is for less than 12 months, check reason: [ ] Initial return [ ] Final return [ ] Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	$ 0.
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit	3b	$ 0.
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	$ 0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** and check this box.... ► [X]

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print	Name of Exempt Organization MEXICAN AMERICAN CULTURAL CENTER, INC.	Employer identification number 74-1712528
File by the extended due date for filing the return. See instructions	Number, street, and room or suite number. If a P.O. box, see instructions. Garza, Preis & Co. 8415 Speedway Dr.	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. San Antonio, TX 78230	

Check type of return to be filed (File a separate application for each return):

[X] Form 990	[ ] Form 990-PF	[ ] Form 1041-A	[ ] Form 6069
[ ] Form 990-BL	[ ] Form 990-T (section 401(a) or 408(a) trust)	[ ] Form 4720	[ ] Form 8870
[ ] Form 990-EZ	[ ] Form 990-T (trust other than above)	[ ] Form 5227	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in care of. ► Dr. Arturo Chavez, PHD
  Telephone No. ► (210) 732-2156 FAX No. ►
- If the organization does not have an office or place of business in the United States, check this box.. .. ► [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN). .. _____ . If this is for the whole group, check this box.. ► [ ]. If it is for part of the group, check this box . ► [ ] and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until 6/15, 20 11.

5 For calendar year ____, or other tax year beginning 8/01, 20 09, and ending 7/31, 20 10.

6 If this tax year is for less than 12 months, check reason: [ ] Initial return [ ] Final return [ ] Change in accounting period

7 State in detail why you need the extension... Additional time is needed to compile information to file a complete and accurate return.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions...	8a	$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868..	8b	$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instrs..	8c	$

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ► [signature] Title ► CPA Date ► 3/6/2011