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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)

(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

2012

Open to Public Inspection

A	For t	he 2012 caler	ndar year, or tax year be	ginning 8/0)1 ,	2012, and endi	ng 7/	'31	, 20	013			
В	Check	ıf applicable	C					D Employ	er Identification	on Number			
	Па	ddress change	MEXICAN AMERIC	AN CATHOLI	C COLLEGE.	INC.		74-	1712528	}			
	\vdash	ame change	3115 WEST ASHB					E Telepho					
	\vdash	itial return	SAN ANTONIO, T					(21)	0) 732-	-2156			
	\vdash	erminated						(21)	<u> </u>	2130			
	\vdash							G Gross re	Ś	2,242,242.			
	\vdash	mended return	F Name and address of prir	nouncil officer			H/a) is this	a group return		1 1 1 1 1 1 1 1 1 1			
	LJA	pplication pending	'I	•			1 ' '			H H			
_	Tau	avament atatus	Same As C Abov			V1) [507	If 'No,	ll affiliates incl ' attach a list	(see instruction	ons) Lites Lite			
÷		exempt status	X 501(c)(3) 501(c)	<u>(</u>)◀ (II	nsert no.) 4947(a)(1) or 527	4						
<u>J</u>			ww.maccsa.org		1 .			exemption nu		0928			
K		n of organization	X Corporation Trust	Association	Other ►	L Year of Forma	ation 197	2 M/s	tate of legal d	domicile TX			
Pa	irti :	Summa Summa	<u>ry</u>										
	1		ibe the organization's m										
မွ			<u>cate leaders fo</u>										
ā			<u>g a bi-literate</u>										
err			r_of_Arts_and/o										
Governance	3	Check this b	oting members of the g		ed its operations o	r disposed of m	ore than a	25% of its					
∘ಶ	4		ndependent voting mem				EIVE	n II	3 4	$\frac{14}{11}$			
es	5		r of individuals employe			THE SEAL PALL		اادرك	5	35			
Activities &	6		er of volunteers (estimate		our 2012 (1 art 1, 11	f 1			6				
Ş	7 a		ted business revenue fro		lumn (C), line 12	MAY .	9 .8 201	14 0	7a	0.			
_			d business taxable inco			(8)		(&)	7 b	0.			
	ļ. 					000		Prior Year		Current Year			
	8	Contribution	s and grants (Part VIII,	line 1h)		l UGD	□IN, t	<u>ا _{548.} ا</u>		682,350.			
25	9	Program ser	vice revenue (Part VIII,	line 2g)		1,041,3		847,924.					
₹	10	Investment i	ncome (Part VIII, colum	n (A), lines 3, 4	l, and 7d).			97,8		75,967.			
æ.	11	Other reveni	ue (Part VIII, column (A)), lines 5, 6d, 8d	c, 9c, 10c, and 11e)		27,5		37,885.			
~	12	Total revenu	ie – add lines 8 through	11 (must equa	l Part VIII, column	(A), line 12)		1,715,2	59.	1,644,126.			
	13	Grants and	similar amounts paid (P	art IX, column (A), lines 1-3)					_			
\preccurlyeq	14	Benefits pair	d to or for members (Pa	rt IX, column (A	4), line 4)								
O .	15	Salaries, oth	ner compensation, empl	oyee benefits (F	Part IX, column (A)	, lines 5-10)		1,262,3	21.	1,005,320.			
Щŝ	16a	Professional	fundraising fees (Part I	X, column (A),	line 11e)								
SCANNED	h		ising expenses (Part IX,		·	113,616.							
	17			• • •		113,010.	_	005 4	7.6	704 560			
Ö	17		ses (Part IX, column (A			OE)		895,4		794,569.			
U.J	1		ses Add lines 13-17 (mi			25)		2,157,7		1,799,889.			
8 8	19	Revenue les	s expenses Subtract lir	ie 18 from line	12			-442,5		-155,763.			
eta (Total assets	(Part V. line 16)					ing of Curren		End of Year			
Š.	20		(Part X, line 16) es (Part X, line 26)					5,441,7		5,223,423.			
¥ 5	21							128,2		86,774.			
— L	22		r fund balances Subtra	ct line 21 from l	line 20			<u>5,313,5</u>	69.	5,136,649.			
Pa	irtill:	🙀 Signatu	re Block										
Und	er pena	Ities of perjury, I o	declare that I have examined this larer (other than officer) is based	s return, including ac	companying schedules ar	nd statements, and to	the best of a	my knowledge	and belief, it	is true, correct, and			
	piete D	T. T.	dier (other train officer) is baser	A I I I I I I I I I I I I I I I I I I I	writeri preparer rias any								
		کے۔	trlus C	havez	<u></u>			5/2	<u>4/20</u>	014			
Sig							U	ale .	•				
He	re		Arturo Chavez,	Ph.D.									
			or print name and title	1.1	· p//	7 - I		1 1-	el Lorenti				
		Print/Type	preparer's name	Preparer's sign	B. 111	Date	/	Check	X if PTIN				
Pa	id	Micha	el Garza,CPA	MicMael	Garza, EPA	5/22/	12014	self-employe	ed P00	0543101			
	epar												
Us	e Or	ily Firm's add	ırm's address ► 8415 Speedway Dr.							Firm's EIN ► 74-2425513			
			San Antoni		10			Phone no	(210)	341-0577			
Ma	v the	IBS discuss t	his return with the prena	erer shown abou	102 (see instruction	nc)				Yes No			

ВАА	TEEA0102L 08/08/12	<u> </u>	F	orm 990	(2012)
(Expenses \$ 4 e Total program service expenses) (Revenue \$	·)	_
4d Other program services (Describ) (Rayanya \$		```	
	·				
					′
4 c (Code) (Expenses	\$ including grants of \$) (Revenue	\$		<u> </u>
					
					-
	-				
		 			- <u>-</u> -
4b (Code) (Expenses	\$ including grants of \$) (Revenue	\$)
	astoral Ministry, and Language Studence of Catholic Bishops Commission		on and		.ne
students.The MACC Mi	nistry Formation Program (with its	three component	s of t	he Mir	i
	uly 31, 2013 of which degree based amounted to 35 students; and contin				125
Hispanics in the Uni	ted States. Participants in these	programs totale	d 228		
	ducational programs focused on past vide training and research relating				ige
<u>bi-literate, multicu</u>	ltural formation program that can l	ead to a BA and	i an MA	in	
The Mexican American	Catholic College is an institution	of higher lear	ning o	fferir	ig a
others, the total expenses, and r	evenue, if any, for each program service reported \$ 1,457,703. including grants of \$) (Revenue		- -	
4 Describe the organization's progr Section 501(c)(3) and 501(c)(4) org	ram service accomplishments for each of its three large lanizations and section 4947(a)(1) trusts are required to rep	st program services, as	measured	by exper	ises
3 Did the organization cease condulated if 'Yes,' describe these changes	ucting, or make significant changes in how it conducts, a on Schedule O	any program services?	□ '	res X	No
If 'Yes,' describe these new servi		_			
Form 990 or 990-EZ?	significant program services during the year which were not	listed on the prior	П	es X	No
O Daltha annual de del del					
See Schedule O					
Briefly describe the organization'		<u> </u>		•	
	ains a response to any question in this Part III				X
Part Statement of Program	m Service Accomplishments		. /12528		age Z

			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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part 1	6		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8	Х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			*
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10° If 'Yes,' complete Schedule D, Part VI	11 a	Х	
	b Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16° <i>If 'Yes,' complete Schedule D, Part VII</i>	11 b		х
	c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part VIII	11 c		х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d	Х	
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	Х	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	Х	v
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
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, Parts II and IV	15		х
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, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

MEXICAN AMERICAN CATHOLIC COLLEGE, INC 74-1712528 Page 4 Part W | Checklist of Required Schedules (continued) Yes No 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 17 If 'Yes,' complete Schedule I, Parts I and II Х 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part Х IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III 22 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 X 23 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 Х 24a 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 25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a X disqualified person during the year? If 'Yes,' complete Schedule L. Part i 25a 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 Х Schedule L. Part I 25b Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or Х disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III Х 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions). X a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Х Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV Х 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M. 29 X Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M. X 30 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N. Part II Х 32 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 Х 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, Х and V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a **b** If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 35b

Note. All Form 990 filers are required to complete Schedule O BAA

X Form 990 (2012)

36

37

Х

X

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

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

	Check if Schedule O contains a response to any question in this Part V				
				Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a (
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b (
c	Did the organization comply with backup withholding rules for reportable payments to vendors and in (gambling) winnings to prize winners?	eportable gaming	1 c		
2 a	Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax State-				
	ments, filed for the calendar year ending with or within the year covered by this return	2a 35		بب	
t	of fat least one is reported on line 2a, did the organization file all required federal employment		2 b	X	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see if				
	Did the organization have unrelated business gross income of \$1,000 or more during the year		3 a		X
	olf 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		3 b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or othe financial account in a foreign country (such as a bank account, securities account, or other forms.)	er authority over, a inancial account)?	4 a		х
b	olf 'Yes,' enter the name of the foreign country				
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and I	Financial Accounts			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the ta	x year ⁹	5 a		<u> </u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shel	ter transaction?	5 b		Х
C	: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, a solicit any contributions that were not tax deductible as charitable contributions?	and did the organization	6 a		х
t	olf 'Yes,' did the organization include with every solicitation an express statement that such contribution to tax deductible?	tions or gifts were	6 b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and payor?	partly for goods and	7 a		X
Ŀ	olf 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 a		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it Form 8282?		7 c		х
c	If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal	benefit contract?	7 e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal ber		7 f		Х
	If the organization received a contribution of qualified intellectual property, did the organization file as required?		7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	e organization file a	7 h		
8	Sponsoring organizations maintaining donor advised funds and section 500/aV2\ cupport	na organizations Did the			
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, or a donor advised fund maintained by a sponsoring organization, holdings at any time during the year?	ng organizations. Did the	8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9 b		
10	Section 501(c)(7) organizations. Enter				
а	Initiation fees and capital contributions included on Part VIII, line 12	10 a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b			
11	Section 501(c)(12) organizations. Enter				
а	Gross income from members or shareholders	11 a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11 b			
12 a	Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu	of Form 1041?	12a		
b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	is the organization licensed to issue qualified health plans in more than one state?		13 a		
	Note. See the instructions for additional information the organization must report on Schedu	le O			
b	Enter the amount of reserves the organization is required to maintain by the states in				
	which the organization is licensed to issue qualified health plans	13b			
-	Enter the amount of reserves on hand	13c	1.0		V
	Did the organization receive any payments for indoor tanning services during the tax year?	Sahadula O	14a	 	X
	off 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in	ocnedule O	14b		(2012)
BAA	TEEA0105L 08/08/12		LOIU	1 990 ((2014)

BAA

Form 990 (2012)

」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. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members 1 a of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 1 t 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 0 officer, director, trustee or key employee? 2 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? Х 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Х 4 Х Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? X 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7 a Х **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? X 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8 a Х **b** Each committee with authority to act on behalf of the governing body? X 8 h 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 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code No Yes 10a Did the organization have local chapters, branches, or affiliates? 10 a X b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 7 X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Х c Did 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 Schedule O how this is done 12 c Х 13 Did the organization have a written whistleblower policy? X 13 14 Did the organization have a written document retention and destruction policy? X 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? Х a The organization's CEO, Executive Director, or top management official 15 a X **b** Other officers of key employees of the organization See Schedule O 15 b 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? 16 a **b** If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website Another's website Other (explain in Schedule O) X Upon request Describe in Schedule 0 whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year See Schedule O State the name, physical address, and telephone number of the person who possesses the books and records of the organization Clemencia Barrera, Finance Dir 3115 West Ashby Place San Antonio TX 78228 (210) 732-2

TEEA0106L 08/08/12

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, 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 neither the organization nor any related organization compensated any current officer, director, or trustee.

(C)

(A)

(B) Position (do not check more than (D)

(E)

(A) Name and Title	(B) Average hours per	one bo	ox, un	less p	perso	k more t in is bot or/truste	h an	(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other compensation
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) Mr. Arturo Chavez, PhD	_ 55 _									
President & CEO	0	Х		X				111,395.	0.	2,338.
(2) Rev. David Garcia	1									1
Director	0	Х						0.	0.	' 0.
_(3) Ms. Joan F. Neal	1									1 .
Director	0	Х						0.	0.	0.
_(4) Dr. R. Scott Woodard	11									1
Director	0	X		-		-		0.	0.	0.
(5) Most Rev. Oscar Cantu,	1	[
Chairman	0	Х						0.	0.	0.
(6) Most Rev. John C. Weste Director	1	х						0.	0.	0.
(7) Most Rev. Gustavo Garci	1	Α.						0.	0.	<u> </u>
Ex-Officio Dir.		х						o.]	0.	0.
(8) Very Rev. Jeff Pehl	1									
Ex-Officio Dir.	0	Х						0.	0.	0.
(9) Rev. Jose H. Gomez, S.T	1									
Director	0	Х						0.	0.	0.
(10) Ms. Ana Novoa	1									
Vice Chair	0	Х						0.	0.	0.
(11) John Bruce, CPA	1									
Secretary/Treas	0	Х						0.	0.	0.
(12) William C. Rainford, Ph	1									
Director	0	Х						0.	0.	0.
(13) Veronica Rayas, Ph.D.	1	[
Director	0	_ x_						0.	0.	0.
(14) Sister Deborah Troillet	1	l								
Director	0	Х						0.	0.	0.

(A)				_						
Name and title	Average hours per week	urs box, unless person is both an er officer and a director/trustee)					n an tee)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	(list any hours for related organiza tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
)										
)										
)										
)		-								
)										
)										
)										,
)										,
)										
)		-								
)							-			
b Sub-total		<u> </u>	····				>	111,395.	0.	2,33
c Total from continuation sheets to Part VII, Secti	ion A						•	0.	0.	
d Total (add lines 1b and 1c) Total number of individuals (including but not limited	I to those I	sted	abo	ve) v	vho i	receiv	ved	111,395. more than \$100,00	0.0 of reportable com	2,33 pensation
Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for such For any individual listed on line 1a, is the sum of the organization and related organizations greates such individual	ch individu f reportab	<i>al</i> le co	mpe	ensa	tion	and	oth	er compensation		Yes N
Did any person listed on line 1a receive or accru- for services rendered to the organization? If 'Yes	ie comper s,' <i>comple</i>	satio te So	n fr chec	om <i>lule</i>	any <i>J fo</i>	unre r suc	late h p	ed organization or erson	ındıvıdual	5
Complete this table for your five highest comper compensation from the organization. Report comper	nsated ind nsation for	epen the c	den alen	t cor dar y	ntrad year	ctors endii	tha	it received more to with or within the or	han \$100,000 of ganization's tax yea	
Name and business add	ress							Description of		(C) Compensation
		-				-				
						_				
Total number of independent contractors (including \$100,000 in compensation from the organization		ted to	o tho	se I	isted	abo	ve) י	who received more	than	

	Check if Schedule O contains a response to any question	n in this Part VIII			
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns. 1 a			-	
88	b Membership dues 1b				
Z Z	c Fundraising events 1 c				
동물	d Related organizations.				, ,
Š	e Government grants (contributions) 1 e				
은					
필	f All other contributions, gifts, grants, and similar amounts not included above 1 f 682, 350.				. '
풀힐					
응록	g Noncash contributions included in lns 1a-1f \$ 206, 920. h Total. Add lines 1a-1f	602.250			1 1
뿔	Business Code	682,350.			
		710 501	710 501		
쮼	2a Tuition and Fees 611600	710,521.	710,521.		
핕	b Room and Board 611600	132,497.	132,497.		
爱	c Translations/Homiletics 611600	4,906.	4,906.		<u> </u>
폭	d Consulting Services 611600				
8	e				
Ž	f All other program service revenue				
-	g Total. Add lines 2a-2f	847,924.			' '
	3 Investment income (including dividends, interest and				
	other similar amounts)	35,490.			35,490.
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties				ļ
	(i) Real (ii) Personal	•			
	6 a Gross rents 7,525.				
	b Less rental expenses				
	c Rental income or (loss) 7,525.				
	d Net rental income or (loss)	7,525.			7,525.
	7 a Gross amount from sales of (i) Securities (ii) Other				
	assets other than inventory 616, 431.	1			
	b Less cost or other basis				,
	and sales expenses 575, 954.				
	c Gain or (loss) 40,477.				
	d Net gain or (loss) ▶	40,477.			40,477.
ш	8a Gross income from fundraising events				
_	(not including \$				'
2	of contributions reported on line 1c)]			1 1
OTHER REVEN	See Part IV, line 18				
불	b Less direct expenses b				1
9	c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities See Part IV, line 19				
	b Less direct expenses b				
	c Net income or (loss) from gaming activities				
					· 1
	10a Gross sales of inventory, less returns and allowances a 48, 926				
	10/320.	İ			:
	b Less. cost of goods sold b 22,162. c Net income or (loss) from sales of inventory	26.764	26.764		
ŀ	Miscellaneous Revenue Business Code	26,764.	26,764.		
ł		2 120			2 120
		2,139.			2,139.
ŀ	b ROYALTIES/PRINTS 900099	1,457.			1,457.
ļ	d All other revenue				+
	e Total. Add lines 11a-11d	2.500			
	12 Total revenue. See instructions	3,596.	874 688		87 088

Part IX | Statement of Functional Expenses

Sec	tion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a re	`		mplete column (A)	
	· · · · · · · · · · · · · · · · · · ·	(A)	(B)	(C)	(D)
7b,	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees	113,733.	0.	38,705.	75,028.
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	766,685.	593,090.	173,595.	
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions).				
9	Other employee benefits.	68,125.	44,297.	17,762.	6,066.
10	Payroll taxes	56,777.	35,081.	15,780.	5,916.
11	Fees for services (non-employees)				
•	a Management				`
	b Legal	. .			
	c Accounting	32,782.	27,404.	4,672.	706.
	d Lobbying .				
	Professional fundraising services See Part IV, line 17				
	f Investment management fees 3 Other (If line 11g amt exceeds 10% of line 25, col-				
ç	umn (A) amt, list line 11g expenses on Sch O)				
12	Advertising and promotion	16,282.	15,554.		728.
13	Office expenses.	tal.			
14	Information technology		-		
15	Royalties				
16	Occupancy				
17	L-	16,280.	6,912.	9,368.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,693.	288.	2,405.	
20	Interest	4,603.		4,603.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	206,790.	172,019.	30,182.	4,589.
23	Insurance. Other expenses Itemize expenses not	29,907.	21,718.	7,261.	928.
24	covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	.4 1 1			
á	Consultants/Contract Labor	125,518.	116,806.	8,712.	
	Utilities & Telephone	93,193.	24,585.	68,015.	593.
	Equipment and Furnishings	60,581.	19,930.	39,577.	1,074.
	Food Service	41,247.	41,247.		
•	All other expenses	164,693.	338,772.	-192,067 <u>.</u>	17,988.
25	Total functional expenses. Add lines 1 through 24e	1,799,889.	1,457,703.	228,570.	113,616.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

BAA

Form 990 (2012)

Balance Sheet Check if Schedule O contains a response to any question in this Part X (A) Beginning of year (B) End of year 217,444. Cash - non-interest-bearing 23,650 1 2 Savings and temporary cash investments 220,086. 144,400. Pledges and grants receivable, net 31,962. 3 106,069. Accounts receivable, net 24,549. 4 12,372. Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 35,093 <u>45,</u>658. Inventories for sale or use 8 Prepaid expenses and deferred charges 9 93. 11,918. 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10 a 6,481,842 b Less accumulated depreciation 10b 10 c 3,277,260 3,327,153 3,204,582. 11 Investments - publicly traded securities 11 1,246,488 733,195. 12 Investments - other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 532,696 747,785. Total assets. Add lines 1 through 15 (must equal line 34) 16 5,441,770 16 5,223,423. Accounts payable and accrued expenses 17 76,203 17 81,624 18 Grants pavable 18 Deferred revenue 19 2,812 19 5,150. 20 Tax-exempt bond liabilities. 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 49,186 Total liabilities. Add lines 17 through 25 26 86,774. 128,201 Organizations that follow SFAS 117 (ASC 958), check here > X and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 27 3,658,275 4,271,915. Temporarily restricted net assets 28 28 408,806 464,634. 29 Permanently restricted net assets 29 1,246,488 400,100. P Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 5,136,649. 33 Total net assets or fund balances 5,313,569. 33 34 Total liabilities and net assets/fund balances 34 5,441,770. 5,223,423.

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		4-1712528		Page 12					
Ŗä	(政) Reconciliation of Net Assets								
	Check if Schedule O contains a response to any question in this Part XI .								
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,644	,126.					
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,799	,889.					
3	Revenue less expenses Subtract line 2 from line 1	3	-155	,763.					
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4								
5	Net unrealized gains (losses) on investments	5 .	5,313 -21	,157.					
6	Donated services and use of facilities	6							
7	Investment expenses	7							
8	Prior period adjustments	8		-					
9	Other changes in net assets or fund balances (explain in Schedule O) .	9		0.					
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	5,136	,649.					
Pâ	社义III Financial Statements and Reporting			•					
	Check if Schedule O contains a response to any question in this Part XII								
			Ye	s No					
1	Accounting method used to prepare the Form 990 Cash X Accrual Other								
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O								
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	Х					
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviseparate basis, consolidated basis, or both	ewed on a							
	Separate basis Consolidated basis Both consolidated and separate basis								
ı	b Were the organization's financial statements audited by an independent accountant?		2b 3	x					
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep	arate							
	basis, consolidated basis, or both								
	X Separate basis Consolidated basis Both consolidated and separate basis								
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the au review, or compilation of its financial statements and selection of an independent accountant?	ıdıt,	2 c 2	х					
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule ${\sf O}$								
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Singl Audit Act and OMB Circular A-133?	e	3 a	Х					
ı	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	audit	3 b						
BAA			Form 99	0 (2012)					

SCHEDULE A (Form 990 er 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No 1545-0047

allury of mego moisseganl

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

		organization							Employer	r identificat	on number		
			THOLIC COLLEG							712528			
Part	(%)	Reason for Publ	ic Charity Status	(All organizations	must o	comple	te this	part.)	See ii	nstructi	ions.		
The or	gar	nization is not a priva	te foundation because	e it is (For lines 1 thro	ugh 11,	check o	nly one	box.)					
1	П	A church, convention	of churches or assoc	ciation of churches desc	cribed in	section	n 170(b)	(1)(A)(i)					
2	X	A school described in	section 170(b)(1)(A)	(ii). (Attach Schedule E	Ξ.)								
3	П	A hospital or a coope	erative hospital servic	e organization describe	ed in sec	tion 17	0(b)(1)(A	\)(iii).					
4	П	A medical research of	organization operated	in conjunction with a h	ospital e	describe	d in sec	tion 17	0(Ь)(1)(А	A)(iii) Er	nter the hos	spital's	S
	_	name, city, and state		•	•							-	
5		An organization operat	ted for the benefit of a mplete Part II)	college or university own	ed or op	erated by	y a gove	rnmenta	l unit des	scribed in	section		
6		A federal, state, or lo	ocal government or go	overnmental unit descri	bed in s	ection 1	170(b)(1)	(A)(v).					
7		An organization that no in section 170(b)(1)(4)	ormally receives a subs A)(vi). (Complete Par	stantial part of its suppor t II)	t from a	governm	ental un	it or fron	n the ger	neral publ	lic described	t	
8	Ш	A community trust de	escribed in section 17	70(b)(1)(A)(vi). (Comple	te Part I	1)							
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	Ll	An organization orga	nized and operated e	xclusively to test for pu	ublic safe	ety See	section	1 509(a)	(4).				
11													
	a Type I b Type II c Type III — Functionally integrated d Type III — Non-functionally integrated												
e													
f		check this box		nation from the IRS that i	,	, ,,	,	·		J	•		
g		Since August 17, 200	06, has the organizati	on accepted any gift o	r contrib	oution fr	om any	of the f	ollowing	persons	;2		,
		(i) A person who d	traatly or indicatly of	ontrolo outher eleme er					٠ ٠ اس	()		Yes	No
		below, the gove	erning body of the sur	ontrols, either alone or opported organization?	logethe	with pe	2150115 0	escribe	u III (II)	anu (iii)	11 g (i)	}	
		_	er of a person describ	-							11 g (ii)		
		•	•	described in (i) or (ii) a	hove?						11 g (iii)	\vdash	
h				e supported organization							119(111)		
		(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9	(iv) i	s the	(v) Did yo	ou notify ization in	organiz	s the	(vii) Amoun	t of mon	etary
				above or IRC section (see instructions))	your go	i) listed in overning ment?	supp	i) of your port?	organize	nn (i) ed in the S ?			
					Yes	No	Yes	No	Yes	No			
(A)													
(B)	3)												
(C)													
(D)													
<u>(E)</u>			6										
T.4.1								ł					

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

and the same and a same a sam	
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part	III If the
organization fails to qualify under the tests listed below, please complete Part III.)	

Sec	tion A. Public Support									
	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 201:	2	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants')									
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf									
3	The value of services or facilities furnished by a governmental unit to the organization without charge									
4	Total. Add lines 1 through 3	_								
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					,				
Sec	tion B. Total Support				· · · · · · · · · · · · · · · · · · ·	<u> </u>				
	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 201	2	(f) Total		
7	Amounts from line 4									
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			<u>.</u>						
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 activ	rities, etc (see ins	tructions)				12			
	First five years. If the Form 990 is organization, check this box and	stop here		ird, fourth, or fifth	tax year as a section	on 501(c)(3)		▶ 🗌		
	tion C. Computation of Pu									
	Public support percentage for 20			ne 11, column (f))		14	<u>%</u>		
	Public support percentage from a 33-1/3% support test — 2012. If			hov on line 12 is	and the line 14 is 3] 33.1/3% or a	15	eack this box		
	and stop here . The organization	qualifies as a pul	blicly supported o	rganization	ind the line 1415.	33-17376 01 11	nore, ci	leck this box		
t	b 33-1/3% support test — 2011. 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									
17 a	17a 10%-facts-and-circumstances test — 2012. 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.									
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances'	and-circumstance test The organiza	s' test, check this ation qualifies as	box and stop he r a publicly support	r e. Explain ii ed organiza	n Part I tion	V how the ►		
	Private foundation. If the organiz	zation did not che	eck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and s	ee inst	ructions -		
BAA					Sal	andula A Æ	·- 000	or 990 F7) 2012		

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support						
	dar year (or fiscal yr beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants')						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4 5	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or						
	facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5. Amounts included on lines 1, 2, and 3 received from disqualified persons						
t	a Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	: Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
	tion B. Total Support	· · · · · ·		1			
	dar year (or fiscal yr beginning in) 🟲 👚	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 6						
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						-
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
_	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		-				
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add Ins 9, 10c, 11, and 12)		•-				
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, o	r fifth tax year as	a section 501(c)	(3)
	tion C. Computation of Pu					,	
	Public support percentage for 20	•	• • • • • • • • • • • • • • • • • • • •	ne 13, column (f))		15	%
	Public support percentage from					16	%
Sec	tion D. Computation of Inv						
17	Investment income percentage f	or 2012 (line 10c,	column (f) divide	d by line 13, colu	mn (f))	17	%
18	Investment income percentage f	rom 2011 Schedu	le A, Part III, line	17		18	%
	33-1/3% support tests – 2012. If is not more than 33-1/3%, check	this box and sto	p here. The organ	nization qualifies a	as a publicly suppo	orted organizatio	n ► 📋
	33-1/3% support tests — 2011. If line 18 is not more than 33-1/3%	o, check this box a	and stop here. Th	e organization qu	alıfıes as a publıcl	y supported orga	33-1/3%, and anization
20	Private foundation. If the organization	zation did not che	ck a box on line	14, 19a, or 19b, c	heck this box and	see instructions	▶ [

	(FUIII 330 OF 330		ALCAN AMER.	TCWN CWIHOL	TO COPPERE'	INC. /4-1	./12528	Page 4
Part IV	Supplement Part II, line (See instruct	al Information. 17a or 17b; and tions).	. Complete th d Part III, line	is part to prov 12. Also com	vide the explan plete this part t	ations required for any addition	by Part II, line al information.	10;
								
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Employer identification number

ME	XICAN AMERICAN CATHOLIC COLLEG	F INC		74-1712528	
Pa			Similar Funds or Acc		ete if
<u> F.a</u>	the organization answered 'Yes' t			counts: compr	7.0 II
		(a) Donor advised ful	nds (b) F	unds and other ac	counts
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 don	or advisors in writing that the a	seets held in donor advised	l funds	
•	are the organization's property, subject to the	organization's exclusive legal co	ontrol?	Yes	No No
6	Did the organization inform all grantees, donor for charitable purposes and not for the benefit impermissible private benefit?	s, and donor advisors in writing of the donor or donor advisor, o	that grant funds can be us or for any other purpose co	sed only nferring Yes	No
Pa	rt Conservation Easements. Comp	ete if the organization and	swered 'Yes' to Form	990, Part IV, Iır	ne 7.
1					
	Preservation of land for public use (e.g., re	ecreation or education)	Preservation of an historic	ally important land	l area
	Protection of natural habitat		Preservation of a certified	historic structure	
	Preservation of open space	turns.	•		
2	Complete lines 2a through 2d if the organization hast day of the tax year	eld a qualified conservation contri	bution in the form of a conse	rvation easement on	the
	last day of the tax year		,	Held at the End of	the Tax Year
	a Total number of conservation easements		2a		
	b Total acreage restricted by conservation easer	nents	2 b		
	c Number of conservation easements on a certif				
	d Number of conservation easements included ii	a (c) acquired after 8/17/06, and	not on a historic		
	structure listed in the National Register	(c) acquired after 3/1/100, and	2 d		
3	Number of conservation easements modified, tran tax year ►	sferred, released, extinguished, or	terminated by the organizati	on during the	
- 4	Number of states where property subject to conse	rvation easement is located >			
5	Does the organization have a written policy reand enforcement of the conservation easemen	garding the periodic monitoring, its it holds?	inspection, handling of vio	lations, Yes	No
6	Staff and volunteer hours devoted to monitoring, ii	nspecting, and enforcing conserva	tion easements during the ye	ar	_
7	Amount of expenses incurred in monitoring, inspe	cting, and enforcing conservation	easements during the year		
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requ	uirements of section 170(h)	(4)(B)(ı) Yes	No No
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote to conservation easements	conservation easements in its revolution of the organization's financial state.	renue and expense statement atements that describes the	t, and balance sheet e organization's ac	, and counting for
Pa	Organizations Maintaining Colle Complete if the organization answ	ctions of Art, Historical T wered 'Yes' to Form 990, I	reasures, or Other Sir Part IV, line 8.	milar Assets.	
1	a If the organization elected, as permitted under art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its finan	ld for public exhibition, education,	or research in furtherance of	ent and balance sh public service, prov	eet works of ide,
	b If the organization elected, as permitted under historical treasures, or other similar assets held following amounts relating to these items:	SFAS 116 (ASC 958), to report or public exhibition, education, or r	t in its revenue statement a esearch in furtherance of pub	and balance sheet olic service, provide	works of art, the
	(i) Revenues included in Form 990, Part VIII,	line 1		► \$	206,920.
	(ii) Assets included in Form 990, Part X			► \$	747,785.
2	If the organization received or held works of art, h amounts required to be reported under SFAS			ovide the following	
	a Revenues included in Form 990, Part VIII, line	1		► \$	
	b Assets included in Form 990, Part X			► \$	

Schedule D (Form 990) 2012 MEXIC				74-1712		Page 2
Part III Organizations Mainta	ining Collections	oi Art, nistorica	i i reasures, or	Other Similar Asse	ets (continu	iea)
3 Using the organization's acquisition items (check all that apply):	, accession, and other	_	_	e a significant use of its c	collection	
a Public exhibition		₩	change programs			
b Scholarly research		e Other				
c Preservation for future gener 4 Provide a description of the organiz		explain how they furth	er the organization's	s exempt purpose in		
Part XIII5 During the year, did the organiza to be sold to raise funds rather the	tion solicit or receive	donations of art, his	orical treasures, o	r other similar assets	່ Yes	X No
Part IV Escrow and Custodial Arra						
reported an amount or				, , , , ,		
1 a Is the organization an agent, trus on Form 990, Part X?	stee, custodian, or ot	her intermediary for o	ontributions or oth	ner assets not included	Yes	 ∏No
b If 'Yes,' explain the arrangement	in Part XIII and com	plete the following ta	ble	L		
				,	Amount	
c Beginning balance				1 c		
d Additions during the year .				1 d		
e Distributions during the year	•			1 e		
f Ending balance				1f		
2 a Did the organization include an a					_ Yes	_ No
b If 'Yes,' explain the arrangement	in Part XIII Check h	ere if the explantion	has been provided	I in Part XIII	L	
Part V Endowment Funds. C	amplete if the er	annization analys	rad 'Vaa' ta Ea	rm 000 Port IV lin	e 10.	
rait v Lindownient runus.	(a) Current	(b) Prior year	(c) Two years	(d) Three years	(e) Four yea	ırs
1 a Beginning of year balance	1,479,577.	1,827,007.	2,209,45		3,150,	
b Contributions	2,576.	3,064.	3,28			728.
c Net investment earnings, gains,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0,20			
and losses	54,810.	65,455.	153,72	3. 383,249.	-256,	265.
d Grants or scholarships.					11,	670.
 Other expenditures for facilities and programs 	590,000.	415,949.	539,45	7. 725,000.	340,	750.
f Administrative expenses						
g End of year balance	946,963.	1,479,577.	1,827,00		2,548,	692.
2 Provide the estimated percentage	=		column (a)) held	as		
a Board designated or quasi-endowm		0.00 [%]				
b Permanent endowment	42.00 %					
c Temporarily restricted endowmer The percentages in lines 2a, 2b,						
3a Are there endowment funds not in to organization by	he possession of the c	organization that are he	ld and administered	for the	Yes	No
(i) unrelated organizations					3a(i) X	115
(ii) related organizations					3a(ii)	X
b If 'Yes' to 3a(ii), are the related of	organizations listed a	s required on Schedu	le R ²		3b	
4 Describe in Part XIII the intended	uses of the organiz	ation's endowment fu	nds See Par	t XIII ~		
Part VI Land, Buildings, and	Equipment. See	Form 990, Part X	, line 10.			
Description of property) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book va	alue
1 a Land			216,062.		216	,062.
b Buildings			4,928,633.	2,287,037.	2,641	
c Leasehold improvements			418,061.	156,394.		<u>,667.</u>
d Equipment			391,819.	335,400.		,419.
e Other			527,267.	498,429.		<u>,838.</u>
Total. Add lines 1a through 1e (Colum	in (d) must equal Foi	rm 990, Part X, colum	n (B), line 10(c))		3,204	
BAA				Schean	ıle D (Form 990	1) 2012

		MEXICAN AMER					. 74-171	2528 Pag	je 3
		- Other Securitie					N/A		
•	(a) Description of s	security or category ne of security)		(b) Book	value		(c) Method of valuation end-of-year market	Cost or value	
(1) Financ	cial derivatives					<u> </u>	•		
(2) Closel	y-held equity interes	sts				ļ ·			
(3) Other						 			
(A)		·							
$\frac{(A)}{(B)}$ – – –		-							
(C)						<u> </u>			
(D)				-			-		
(E)						<u> </u>		_	
(F)									
(G)		-							
(H)						<u> </u>			
(l)				-		<u> </u>	• •		
	mn (h) must equal Form 9		12.)			-	· · · · · · · · · · · · · · · · · · ·		
Part VII		- Program Relate			Part X	line 13	N/A		
ii ait viii		f investment type	<u>.u.</u> 000	(b) Book		Time 13.	(c) Method of valuation.	Cost or	
_	(4) 2000, p.1011 0			(5) 5001	value		end-of-year market	value	
(1)									
(2)									
(3)									
(4)		,							
(5)									
(6)									
(7)									
(8)									
(9)			•					· · · · · · · · · · · · · · · · · · ·	
(10)									
Total. (Colu	mn (b) must equal Form S	990, Part X, column (B) lin	e 13.) ►	-		i			
Part IX		See Form 990, F		line 15.		·			
				scription				(b) Book value	
(1) Lik	rary Collect	ion						747,78	5.
(2)								<u> </u>	
(3)									
(4)									
(5)									
(6)									
(7)	• •			• • •					
(8)	·							-	
(9)									
(10)	<u></u>								
	olumn (b) must eau:	al Form 990, Part X,	column (B) line 15.)			-	747,78	5
Part X		es. See Form 990						717,10	"
I uit /		ition of liability	<u>, i ait</u>		ook value		·	· ··-	
(1) Fede	eral income taxes			(5)5	JON Value				
(2)								-	
(3)								-	
(4)		· ·	·						
(5)									
(6)									
(7)									
(8)	-								
	-								
(9)								•	
(10)		_							
(11)	4			_					
		990, Part X, column (B) line		<u> </u>			-	<u> </u>	
under FIN 48	ASC 740) Footnote In Par (ASC 740) Check here if	t XIII, provide the text of the f the text of the footnote ha	ie tootnote s been prov	to the organizatio vided in Part XIII	n's tinancial	statements th	nat reports the organization's liability	tor uncertain tax position	ns

Page 3

Schedule D (Form 990) 2012 MEXICAN AMERICAN CATHOLIC COL		74-1712528	Page 4
Reconciliation of Revenue per Audited Financial Sta	tements With Revenue p	er Return	
1 Total revenue, gains, and other support per audited financial statements		1 1	,655,065.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a Net unrealized gains on investments	2a -21,	157.	
b Donated services and use of facilities	2b 32,	096.	
c Recoveries of prior year grants.	2c		
d Other (Describe in Part XIII)	_ 2 d		
e Add lines 2a through 2d		2 e	10,939.
3 Subtract line 2e from line 1		3 1	,644,126.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
b Other (Describe in Part XIII)	4b		
c Add lines 4a and 4b		4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, II	•		<u>,644,126.</u>
<u>PartixIII</u> Reconciliation of Expenses per Audited Financial St	atements With Expenses		
1 Total expenses and losses per audited financial statements.		1 1	<u>,831,985.</u>
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	1 - 1		
a Donated services and use of facilities	2a 32,0	096.	
b Prior year adjustments	2 b		
c Other losses	2 c		
d Other (Describe in Part XIII)	2 d		22 225
e Add lines 2a through 2d		2 e	32,096.
3 Subtract line 2e from line 1 4 Amounts included on Form 990 Part IX line 25 but not on line 1:	1 1	3 1	<u>,799,889.</u>
4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII)	4b		
c Add lines 4a and 4b	[_+5]	4c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I,	line 18.)		,799,889.
Part XIII Supplemental Information	· · ·	···· ·	, ,
Complete this part to provide the descriptions required for Part II, lines 3, 5, a line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. A	nd 9, Part III, lines 1a and 4, P Also complete this part to provid	art IV, lines 1b and a de any additional info	2b, Part V, ormation.
Part V, Line 4 - Intended Uses Of Endowment Fund			
The intended uses of the endowment funds are t	o provide funding f	or general	
operations; specifically to assist and allow	the College to devel	op the curric	ulum
and building of the student body.			
BAA		Schedule D (Fo	orm 990) 2012

SCHEDULE E (Form 990 or 990-EZ)

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

2012

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Department of the Treasury Internal Revenue Service

Name of the organization

MEXICAN AMERICAN CATHOLIC COLLEGE, INC.

Employer identification number

74-1712528

Рa	itighe			
			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	Х	
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 has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If 'Yes,' please describe If 'No', please explain. If you need more space, use Part II	3	X	
4	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. Does the organization maintain the following?			
,	a Records indicating the racial composition of the student body, faculty, and administrative staff?	4 a	X	
	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4 ь	Х	
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4 c	х	
	d Copies of all material used by the organization or on its behalf to solicit contributions?	4 d	X	\vdash
	If you answered 'No' to any of the above, please explain If you need more space, use Part II.			
5	Does the organization discriminate by race in any way with respect to	-		
_	a Students' rights or privileges?	5 a		Х
	b Admissions policies?	5 b		Х
	c Employment of faculty or administrative staff?	5 c		Х
1	d Scholarships or other financial assistance?	5 d		Х
•	e Educational policies?	5 e		Х
	f Use of facilities?	5 f		Х
,	g Athletic programs?	5 g		Х
1	h Other extracurricular activities? If you answered 'Yes' to any of the above, please explain. If you need more space, use Part II	5 h		Х
		-		
	a Does the organization receive any financial aid or assistance from a governmental agency?	6 a		Х
	b Has the organization's right to such aid ever been revoked or suspended?	6 b		Х
7	If you answered 'Yes' to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If			
	'No,' explain on Part II	7	X	I

Schedule	E (Fo	rm 990	or 990	-EZ) 2	2012	MEX	ICAN	AME	RICA	N CA	THOL	IC	COLL	EGE,	INC		<u>7</u> 4-	1712	528		Page 2
Partills	Supp and	lement 7, as a	al Info	rmation	on. C Also	omple com	ete this plete t	part t	to prov art to	ide the	e expla de any	anation	ons red	quired ditiona	by Par	t I, line rmatio	s 3, 4d n (see	, 5h, 6 instr	ib, uctions	s).	
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SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

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

2012

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(9) (10)

Open to Public Inspection	

Name of th	e organization					•			Em	ployer ı	dentifica	ation nu	mber		
	AN AMERICA										1252				
Part I	Complete if the	enefit Trans	actions (sec answered 'Yes'	ction 5 on Form	01(c)(3 990, Pa	3) and	section ne 25a or 25	501(c)(4) or b, or Form 990	ganıza EZ, Pari	ations t V, lin	only e 40b	/).			
1	(a) Name of disqua	alified person	(b) R		between o		d	(c) D	escription	of trans	action			(d) Cor	rected
				person a	nd organiza	ation								Yes	No
<u>(1)</u>							•								
(2)															
(3)					-										
<u>(4)</u>		_													
(5)														<u> </u>	<u> </u>
<u>(6)</u>														<u> </u>	
se	iter the amount o ction 4958 iter the amount o				-			rsons during th	e year (under	►\$ ►\$				
Part II	Complete if t	and/or From the organization reported an am	answered 'Yes	' on For	m 990-E	Z, Page 5, 6, or	v, line 38a 22.	a or Form 990, I	Part IV,	line 2	6; or it	the			
(a) Name	e of interested person	(b) Relationship with organization	(c) Purpose of loan	1 from	an to or n the ızatıon?		e) Original cipal amount	(f) Balance	due	(g) In	default?	by bo	pproved pard or mittee?	(i) W agree	ritten ment?
				То	From					Yes	No	Yes	No	Yes	No
(1)				1	1					1					\vdash
(2)				1						1				1	
(3)													1		
(4)															
(5)															
(6)															
(7)															
(8)			_												
<u>(9)</u>	·														-
(10)															
Total					•		▶ \$								
Part III		Assistance he organization	Benefiting I answered 'Yes	Interes	sted Pe m 990, F	erson: Part IV,	s. Iine 27.								
	(a) Name of intere	sted person	(b) Relationship	between the organ	interested ization	person	(c) Amou	nt of assistance	(d) Typ	e of As	sistance	(e)) Purpos	e of ass	ıstanc
(1)					_							+			
(2)		 .										\dashv			
(3)			-				 								
(4)												+			
(5)							-					+			
(6)			1									+			
(7)							 					\dashv			
(8)				-							-				

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2012

Schedule L (Form 990 or 990-EZ) 2012 MEXIC.	AN AMERICAN CAT	HOLIC COLLEGE,	74-1712528	Page 2
Part IV Business Transactions Involve Complete if the organization answered	ring Interested Pers 'Yes' on Form 990, Part	sons. 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?
(1) Very Rev. Jeff Pehl	Board Member	63,118.	Purchases of Services	Yes No
(1) Very Nev. Jerr Felir (2)	Board Member	63,116.	Pulchases of Services	
(3)				
(4)			· · · · · · · · · · · · · · · · · · ·	
(5)				
(6)				
(7)				
(9)	•			
(10)				
Part V Supplemental Information				'
Complete this part to provide additional	information for response	es to questions on Sched	ule L (see instructions).	
			- -	
			Cabadula I /Farm 000 au (000 ET 0010

SCHEDULE M (Form 990)

Noncash Contributions

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

Open To Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990.

MEXICAN AMERICAN CATHOLIC COLLEGE, INC

Employer identification number

74-1712528 Part I Types of Property (a) (c) (d)
Method of determining noncash contribution amounts Check if Number of Noncash contribution amounts reported on Form 990, applicable contributions or items contributed Part VIII, line 1g Art - Works of art 2 Art - Historical treasures 3 Art - Fractional interests 4 Books and publications 206,920. Market Data 5 Clothing and household goods Cars and other vehicles 6 7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded Securities - Closely held stock 10 Securities - Partnership, LLC, or trust interests 11 12 Securities – Miscellaneous Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 14 15 Real estate – Residential Real estate - Commercial 16 17 Real estate - Other Collectibles 18 19 Food inventory Drugs and medical supplies 20 Taxidermy 21 22 Historical artifacts Scientific specimens 24 Archeological artifacts 25 Other -26 27 Other > 28 Other ►

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? **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?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

Number of Forms 8283 received by the organization during the tax year for contributions for which the

b If 'Yes,' describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

Yes No 30 a 31 32 a

29

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

organization completed Form 8283, Part IV, Donee Acknowledgement

Schedule M (Form 990) 2012

Schedule I	M (Form 990) 2012	MEXICAN	AMERICAN	CATHOLIC	COLLEGE,	INC.	74-1712528	Page 2
Partile	Supplemental Ir and 33, and who number of items	formation. ther the or received,	. Complete ganization or a combir	this part to p is reporting nation of bot	provide the in Part I, co h. Also cor	information olumn (b), t nplete this	required by Part I, lines 30b, the number of contributions, the part for any additional informa	32b, ne ition.
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

| 201

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

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

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OMB No 1545-0047

Name of the organization	Employer identification number
MEXICAN AMERICAN CATHOLIC COLLEGE, INC.	74-1712528
Form 990, Part III, Line 1 - Organization Mission	
The College's mission is "To empower and educate leaders for se	ervice in a culturally
diverse church and society by offering a bi-literate, multi-cl	utural formation
program that can lead to a Bachelor of Arts and/or Master of A	rts_degree_in_Pastoral
Ministry". In accomplishing this mission the College offers e	ducational classes,
workshops and symposiums which focus on pastoral and multicult	ural_training
Further_the_College_offers_intensive_Pastoral_English_and_Span	ish_courses_and
engages_in_research_projects_which_parallel_and_compliment_its	_mission
Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Director	rs, Etc
The Roman Catholic Archdiocese of San Antonio is related direc	tly to the Assumption
Seminary of San Antonio. Each of these entities holds an ex-o	fficio seat, through
the Archbishop of San Antonio and the Seminary's Rector, on th	e Board of Trustees of
the Mexican American Catholic College. Further, various membe	rs 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 b	elong to the same
religious order.	
Form 990, Part VI, Line 11b - Form 990 Review Process	
The Federal Form 990 is prepared by the external CPA firm which	h performs the annual
audit of the organization's financial statements. Following t	he 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 f	iling 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 Inter	nal Revenue Service.

MEXICAN AMERICAN CATHOLIC COLLEGE, INC.	74-1712528
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Cor	ıflicts
Annually each Responsible Person (officer, employee, or member	of the Board of
Trustees of the organization) shall complete a disclosure form	identifying any
relationships, positions, or circumstances in the Responsible B	Person is involved
that he or she believes could contribute to a Conflict of Inter	cest. Each new
Responsible Person to the organization shall be required to rev	view the policy and
acknowledge in writing that he or she has done so	
Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers	& Key Employees
The President and CEO is hired by the Board of Trustees of the	organization. From
this hiring process a written employment contract is extended t	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 c	lose of the contract
term the board will review the individuals performance during t	tenure of employment
_ and extend a new contract or allow the contract to lapse. The	Board of Trustees
will determine the need to interview new candidates for this po	osition. The
President and CEO performs the hiring of all other staff of the	e_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.	 -
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(Rev January 2013)

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 i	Automatic 3-Month Extension, complete only Part I and check this box	
•	If you are filing for an I	Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this for	m)

Do not complete Part II unless you have already been granted an automatic 3-month extention on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a

request an ex Associated \	required to file Form 990-T), or an additional (not xtension of time to file any of the forms listed in Part With Certain Personal Benefit Contracts, which m ling of this form, visit www.irs.gov/efile and click of	l or Part II v ust be sent	vith the exception of Form 8870, Information to the IRS in paper format (see instructi	Retur	n for Tran	sfers
Part'	Automatic 3-Month Extension of Time	Only sul	omit original (no copies needed).			
A corporatio	on required to file Form 990-T and requesting an a	automatic 6	month extension - check this box and	compl	ete Part I	l only
All other coi	rporations (including 1120-C filers), partnerships, returns	REMICs, a				
	Name of exempt organization or other filer, see instructions		Enter filer's identif			see instructions ation number (EIN) or
Type or	Name of exempt organization of other filer, see instructions			Emplo	yer identific	ation number (EIN) or
print	MEVICAN AMEDICAN CARNOLIC COLL	CCC T	NC.	7.	171050	
File by the	MEXICAN AMERICAN CATHOLIC COLI		NC.		171252 locial securi	ty number (SSN)
due date for	3115 WEST ASHBY PLACE					
filing your return See	City, town or post office, state, and ZIP code For a foreign add	ress, see instru	ictions	L		
instructions	SAN ANTONIO, TX 78228					
Enter the Re	eturn code for the return that this application is fo	r (file a sej	parate application for each return)			01
Application Is For		Return Code	Application Is For			Return Code
Form 990 or	Form 990-EZ	01	Form 990-T (corporation)			07
Form 990-BI		02	Form 1041-A			08
Form 4720 (ı		03	Form 4720			09
Form 990-PI		04	Form 5227			10
	(section 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-1	(trust other than above)	06	Form 8870			12
Telephon If the org If this is check the	nsion is for	FAX No siness in th digit Group theck this b	e United States, check this box Exemption Number (GEN) and attach a list with the na			► ☐ whole group, of all members
	st an automatic 3-month (6 months for a corporation	•	•			
The ex	3/15, 20 14 , to file the exempt organization is for the organization's return for: calendar year 20 or tax year beginning 8/01, 20 rax year entered in line 1 is for less than 12 montaining in accounting period	, and endir	ng _ <u>7/31</u> , 20 <u>13</u>	al retu	ırn	
nonref	application is for Form 990-BL, 990-PF, 990-T, 47 undable credits. See instructions			3 a	\$	0.
	application is for Form 990-PF, 990-T, 4720, or 60 ints made. Include any prior year overpayment all			3 b	\$	0.
c Balance EFTPS	ce due. Subtract line 3b from line 3a. Include you 6 (Electronic Federal Tax Payment System) See	r payment v instructions	with this form, if required, by using	3с	\$	0.
Caution. If yo	ou are going to make an electronic fund withdrawal wi	ith this Form	8868, see Form 8453-EO and Form 8879-E	O for		

payment instructions

Type or print File by the extended due date for filer, see unstructions Enter filer's identifying number, see instructions MEXICAN AMERICAN CATHOLIC COLLEGE, INC. Number, street, and room or suite number if a P O box, see instructions Garza, Preis & Co. 8415 Speedway Dr. City, town or post office, state, and ZIP code For a foreign address, see instructions San Antonio, TX 78230 Enter the Return code for the return that this application is for (file a separate application for each return). O Application Is For Form 990-BL Form 990-BL Form 990-BL Form 990-PF O4 Form 5227 Form 990-T (section 401(a) or 408(a) trust) D3 Form 6069		are filing for an Automatic 3-Month Extension Additional (Not Automatic) 3-Mont			al (no copies	needed)
Type or print MEXICAN AMERICAN CATHOLIC COLLEGE, INC. 74-1712528	• • • • • • • •					
MEXICAN AMERICAN CATHOLIC COLLEGE, INC. 74-1712528		Name of exempt organization or other filer, see instructions	;			
MEXICAN AMERICAN CATHOLIC COLLEGE, INC. 74-1712528	Type or				1	
Carza, Preis & Co. 8415 Speedway Dr. San Antonio, TX 78230 Enter the Return code for the return that this application is for (file a separate application for each return). Commission Code Code Commission Code Commission Code Commission Code Commission Code Code Commission Code Code Commission Code Code Code Commission Code Code Commission Code Code Commission Code Commission				IC.		
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