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Return of Organization Exempt From Income Tax

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

► Do not enter Social Security numbers on this form as it may be made public.
► Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury

	Service									
7 ^	013 calend	dar year, or ta	x year begi	nning 8/	01	, 20	013, and endir			2014
B Check if app	licable	С						ال		ication Number
Addres	s change	MEXICAN A			IC COLLE	EGE, II	NC.		74-17125	
Name o	change	3115 WEST						ĮΕ	Telephone number	er
Initial r	eturn	SAN ANTO	NIO, TX	78228				1	(210) 73	32-2156
Termin	ated							ĺ		
Amend	ed return							G	Gross receipts \$	2,080,393.
Applica	ation pending	F Name and add	dress of princip	al officer				H(a) Is this a gro	up return for subc	ordinates? Yes X No
<u> </u>		Same As (Above					H(b) Are all subo	ordinates included th a list (see instr	
Tax-exem	not status	X 501(c)(3)	501(c) ()◀ (insert no)	4947(a)(1	1) or 527	ir No, attac	ın a ust (see insti	ructions)
J Websit		w.maccsa.		``			<u> </u>	H(c) Group exem	notion number	0928
	organization	X Corporation	Trust	Association	Other >		L Year of forma			gal domicile. TX
	Summar			1						• <u> </u>
1 Brie	efly descri	be the organiz	ation's miss	sion or most	significant a	ctivities	See Sche	dule O		
	,	3-			g		255 2510	<u></u>		
Activities & Governance 2 Che 3 Nul 4 Nul 5 Tot 6 Tot 7a Tot										
<u> </u>				- -	-			- -		
2 Ch	eck this bo	x ► I if the	organizati	on discontin	ued its opera	ations or o	disposed of m	ore than 25%	of its net ass	ets
S Nu		ting members					·		3	14
25 4 Nui	mber of in	dependent vot	ing membe	rs of the gov	erning body	(Part VI,	line 1b)		4	1:
.≝ 5 Tot		of individuals				art V, line	e 2a)		5	35
[6 Tot		of volunteers							6	
-		ed business re							7 a	0
b Net	unrelated	business taxa	able income	from Form	990-T, line 3	34			7 b	0
_		_							Year	Current Year
<u>e</u> 8 Coi		and grants (P							82,350.	197,593
9 Pro	-	rice revenue (F		_			•	8	47,924.	1,016,340
a u i		come (Part VI							75,967.	62,834
11 0"		e (Part VIII, co					10\	<u> </u>	37,885.	30,274
		e — add lines 8					(), line 12)	1,6	44,126.	1,307,041
1		ımılar amounts				3)				
i i	•	to or for mem								
ဖွ 15 Sal		er compensation	. // 07	7 11 22		ımn (A), I	ines 5-10)	1,0	05,320.	971,424
16a Pro	ofessional	fundraising fè	es (Part IX,	column (A),	line 11e)	•				
b To	tal fundrais	sing expenses	(Part IX, co	olumn (D), li	ne 25) ►		96,890.		-	11
17 Oth		ses (Part IX, co	_						94,569.	807,834
	•	es Add lines 1				A). line 2	5)		99,889.	1,779,258
	-	expenses Su				· / /,	-,		55,763.	-472,217
	VOITGO 1030	o capellaca e c	JOHOCK IIIC	10 110111 11110					Current Year	End of Year
8 8									23,423.	4,681,475
20 To	al assets	(Part X line 1)	6)					1 5 2		
8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8		(Part X, line 16						5,2		
<u>, </u>	tal liabilitie	s (Part X, line	26)	luna 21 frau	l 20		•		86,774.	15,137
22 Ne	tal liabilitie t assets or	s (Part X, line fund balance	26)	line 21 from	line 20		· 			15,137
22 Ne	tal liabilitie t assets or Signatur	s (Part X, line fund balance e Block	26) s Subtract				-	5,1	86,774. 36,649.	15,137 4,666,338
22 Ne	tal liabilitie t assets or Signatur	s (Part X, line fund balance e Block	26) s Subtract			hedules and	statements, and to	5,1	86,774. 36,649.	15,137 4,666,338
22 Ne	tal liabilitie t assets or Signatur	s (Part X, line fund balance e Block	26) s Subtract	eturn, including a n all information		hedules and er has any kr	statements, and to nowledge	5,1	86,774. 36,649.	15,137
21 Total 22 Ne Part II Under penalties complete Declar	tal liabilitie t assets or Signatur of perjury, I de ration of prepa	es (Part X, line fund balance: The Block T	26) s Subtract			hedules and er has any kr	statements, and to	5,1	86,774. 36,649.	15,137 4,666,338
22 Ne Part II	tal liabilitie t assets or Signatur of perjury, I diration of prepa	s (Part X, line fund balance: re Block sclare that I have earer (other than offiner of officer	s Subtract Examined this recer) is based of	eturn, including an all information		hedules and er has any kr	statements, and to nowledge	5,1 the best of my kn	86,774. 36,649. owledge and belie	15,137 4,666,338
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Part II Under penalties complete Declar Sign Here Paid Preparer Use Only	tal liabilitie t assets or Signatur of perjury, I diration of prepa Signatu Mr. Type or Print/Type of Michae Firm's name	re Block clear that I have earer (other than offine of officer Arturo C print name and tit oreparer's name cl Garza, clear Garza, clear Garza, de Garza, de Garza, ess 8415	xamined this receip is based on Clark Chavez, lie CPA A, Preis Speedwa Antonio,	Ph.D. Prepared so Michaeles & Co. Ay Dr. TX 782	ccompanying sci of which prepare mature I Garza	d) in Jepa	2/3/2	5,1 the best of my kn Z Date Preside Che self	86,774. 36,649. owledge and belief. -//3/ ent. eck X if	15,137 4,666,338 ef, it is true, correct, and 7.5 PTIN P00543101

	RICAN CATHOLIC COLLEGE, INC.	74-1712528 Page 2
Rantilla Statement of Progra	•	
	tains a response or note to any line in this Part III	. X
1 Briefly describe the organization	i's mission	
See_Schedule_O		
	<u> </u>	
-	y significant program services during the year which were not listed on	the prior
Form 990 or 990-EZ?		. [Yes X No
If 'Yes,' describe these new serv		
	flucting, or make significant changes in how it conducts, any progr	ram services? Yes X No
If 'Yes,' describe these changes		
Describe the organization's prog Section 501(c)(3) and 501(c)(4) or others, the total expenses, and	gram service accomplishments for each of its three largest program ganizations and section 4947(a)(1) trusts are required to report the am revenue, if any, for each program service reported.	m services, as measured by expenses lount of grants and allocations to
4a (Code) (Expenses	\$ 1,486,896. including grants of \$) (Revenue \$
	Catholic College is an institution of hi	igher learning offering a
	ultural formation program that can lead to	
	Educational programs focused on pastoral,	
	ovide training and research relating to co	
	ited States. Participants in these progra	
	July 31, 2014 of which degree based amount	
	n amounted to 378 students. The MACC Minist	
(with its three comp	ponents of the Mini Pastoral, Hispanic Pas	storal Ministry, and
	accredited through the United States Conf	
Bishops Commission C	on Certification and Accreditation.	
4b (Code) (Expenses	\$ including grants of \$) (Revenue \$
		
		
		
4c (Code) (Expenses	\$ including grants of \$) (Revenue \$)
		-
		
		
4d Other program services (Descri		
(Expenses \$	including grants of \$) (Reven	ue \$)
4 e Total program service expense		E 000 (0012)
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Page 3

	•		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? If 'Yes,' complete Schedule C, Part II	4		X
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 I	6		<u>x</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8	Х	
9	Did the organization report an amount in Part X, line 21, 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		X
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, VIII, VIII, IX, or X as applicable.		遊	1
i	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? If 'Yes,' complete Schedule D, Part VII	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		X
	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		X
	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	<u> </u>
	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.	12 t		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E a Did the organization maintain an office, employees, or agents outside of the United States?	13	X	X
		14a	-	 ^ -
	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 other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? 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
	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
20	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	

74-1712528 Page 4 MEXICAN AMERICAN CATHOLIC COLLEGE, INC Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 Х Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part 22 IX. column (A), line 27 If 'Yes,' complete Schedule I, Parts I and III Х 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 23 Х Schedule J. 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25a. 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 Х 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 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II Х 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 Χ 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) £11. 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 Schedule L, Part IV Х 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 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M \overline{X} 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule MX 30 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N. Part I 31 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 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, and V, line 1 X 34 X 35 a 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 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

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Х Form 990 (2013)

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Х

Х

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 197

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

Check of Schedule O contains a response or note to any line in this Part V			
		Yes	No
1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	0 ,		
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	0 450	1-70	郑 "问
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	ัน <u>ก็สี</u> 1 c	27 gb12 . 35 gb23 s	ne objecti
2 a 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 2 a	35	1.2	. [
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b		
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		Х
b If 'Yes,' enter the name of the foreign country ▶	- 15 kg	عامية الأ	11.4
See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	3,00	11.	4
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a	1	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b	-	X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c	<u> </u>	<u> </u>
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).	1. 7.	Ţ	:
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?	7 a		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	,	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	. 7 c		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year 7 d	يۇر _{ايا} چە ئامۇ سە	حست أندا	أجسمها
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e	:	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f	<u> </u>	X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	70]	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	71	1	ļ
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	, , a k .k.a	
9 Sponsoring organizations maintaining donor advised funds.	120		
a Did the organization make any taxable distributions under section 4966?	9 8		
b Did the organization make a distribution to a donor, donor advisor, or related person?	91	ь	1
10 Section 501(c)(7) organizations. Enter	13.	11 . 102	5 3
a Initiation fees and capital contributions included on Part VIII, line 12 . 10a		1 1	3 4
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			18 [1]
11 Section 501(c)(12) organizations. Enter		B	-> M
a Gross income from members or shareholders			2
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		ر فرسان مار الم	
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12		1
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.			1
a 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 Schedule O	- 45	ا چار کې	
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	ريغ ا اورا		·
c Enter the amount of reserves on hand	— §		·
14a Did the organization receive any payments for indoor tanning services during the tax year?	14). a	TX.
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14		+
BAA TEEA0105L 07/02/13			(2013)

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. Check if Schedule O contains a response or note to any line 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 of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 1 a b Enter the number of voting members included in line 1a, above, who are independent 1 b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other See Schedule O 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? 3 Х Did the organization make any significant changes to its governing documents Х since the prior Form 990 was filed? 4 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X 6 Did the organization have members or stockholders? 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 X b Are any governance decisions of the organization reserved to (or subject to approval by) members, Х stockholders, or other persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. a The governing body? 8 a b Each committee with authority to act on behalf of the governing body? 8 b X 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10 a Did the organization have local chapters, branches, or affiliates? Х 10 a 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 X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing 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 "好"与特 -5:4" 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in See Schedule O Schedule O how this was done Х 12 c 13 Did the organization have a written whistleblower policy? 13 Х 14 Did the organization have a written document retention and destruction policy? X 14 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? 土包 a The organization's CEO, Executive Director, or top management official Х 15 a **b** Other officers of key employees of the organization See Schedule O 15_b 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? 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? 16b 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 X Another's website Own website X Upon request Other (explain in Schedule O) 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 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

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

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

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

- 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 no	or any rela	ted org	janiz	atio	n co	mpens	sated	l any current officer, dir	ector, or trustee.	
				(C)		- 1			
(A) Name and Title	(B) Average hours per week (list	one bo offic	on (do ix, uni er an	not d less p d a di	check ersoi recto	more ti n is both r/trustee	han n an e)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	any hours for related organiza- tions below dotted line)	Individual trustee or director	institutional trustee	Officer	Key employee	Former Highest compensated employee Key employee		the organization (W 2/1099-MISC)	relaléd organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Mr. Arturo Chavez, PhD	_ 55 _									
President & CEO	0	X		X				109,483.	0.	7,584.
(2) Rev. David Garcia	1	1								
Director	0	X					<u> </u>	0.	0.	0.
(3) Ms. Joan F. Neal	1	1								
Director	0	X	L					0.	0.	0.
(4) Dr. R. Scott Woodard	1	ļ		i						
Director	0	X					<u> </u>	0.	0.	0.
(5) Most Rev. Oscar Cantu,	1_1_	ļ								
Chairman	0	<u>X</u>			_			0.	0.	0.
(6) Most Rev. John C. Weste	1	ļ								
Director	0_	<u>X</u>	ļ				上	0.	0.	0.
(7) Most Rev. Gustavo Garci Ex-Officio Dir.	$-\frac{1}{0}$	x						0.	0.	0.
(8) Very Rev. Jeff Pehl	1	<u>^</u> -	+-	┝	\vdash	-	-		0.	
Ex-Officio Dir.	┤- <i>-</i> ें	x						0.	o.)	0.
(9) Rev. Jose H. Gomez, S.T	1		1				1			
Director	0	X						0.	0.	0.
(10) Ms. Ana Novoa	1		1		П		1			
Vice Chair	70	X				İ		0.	0.	0.
(11) John Bruce, CPA	1									
Secretary/Treas	0	_ x_						0.	0.	0.
(12) William C. Rainford, Ph	1									
Director		X						0.	0.	0.
(13) Veronica Rayas, Ph.D.	_ 1									
Director	0	X	L				L	0.	0.	0.
(14) Sister Deborah Troillet	1									
Director	0	X		L	<u> </u>	<u> </u>		0.	0.	0.

(A) Name and title	Average hours per week (list any	(do box offic	not cl unle	Pos heck ss pe	ition more erson tirecte	than o	one an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other
	hours for related organiza - tions below dotted line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	ormer	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(15)		-								†
(16)	 	-								-
(17)	 									
(18)		-								
(19)		+-			-					
(20)					T					
(21)			-		-					
(22)		-			-					
(23)		-			 					
(24)		-								
(25)		-			<u> </u>					
1 b Sub-total				-1			>	109,483.		
c Total from continuation sheets to Part VII, Secti d Total (add lines 1b and 1c)	on A						-	109,483		0. 0. 7,584
Total number of individuals (including but not limited from the organization 1	I to those	listed	d abo	ove)	who	rece	ived			
3 Did the organization list any former officer, direction line 1a? If 'Yes,' complete Schedule J for sur	ctor, or tr	ustee lual	e, ke	ey e	mple	oyee,	or 1	nighest compens	ated employee	Yes No
For any individual listed on line la, is the sum of the organization and related organizations great such individual	f reporta er than \$	ble c 150,	omp 0007	ens P <i>If</i>	atio 'Yes	n and Con	d oth ople	ner compensation te Schedule J foi	from	4 X
5 Did any person listed on line 1a receive or accrufor services rendered to the organization? If 'Ye	ue compe s,' comp	ensat lete S	ion f Sche	rom dule	n an e J	y unr	elati ich p	ed organization operson .	r individual	5 X
Section B. Independent Contractors 1 Complete this table for your five highest compe	nsated in	depe	nde	nt c	ontr	actor	s th	at received more	than \$100,000 of	···-
compensation from the organization Report compe (A) Name and business add		or the	cale	ndai	r yea	ar end	ling	(1	organization's tax y B) of services	(C) Compensation
rame and dustriess and							_	Description		Compensation
							_			
2. Total number of independent contractors (including	but not to	milad	10.11		. 1:-4	ad at		habe received	to the a	to takey companions of America
2 Total number of independent contractors (including \$100,000 of compensation from the organization)		milea	io il	IUSE	: IISt	eu ab	ove)	wno received mo	re man	一种
BAA		TEE	A010	BL 1	1/11/	13				Form 990 (2013

Form 990 (2013)

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) 5 Total revenue Related or Unrelated Revenue business excluded from tax exempt function revenue under sections 512-514 revenue 1 a Federated campaigns. CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS **b** Membership dues 1 b c Fundraising events 1 c d Related organizations. 1 d e Government grants (contributions) 1 e f All other contributions, gifts, grants, and similar amounts not included above 1 f 197,593 g Noncash contributions included in lines 1a-1f* 18,884 h Total. Add lines 1a-1f 197,593 PROGRAM SERVICE REVENUE **Business Code** 2a Tuition and Fees 611600 893,208 893,208 b Room and Board 611600 119,165 119,165 3,967 Translations/Homiletics 611600 3,967 d Consulting Services 611600 f All other program service revenue 计编号记录: g Total. Add lines 2a-2f 1,016,340. Investment income (including dividends, interest and other similar amounts) 23,099 <u>23,099</u> Income from investment of tax-exempt bond proceeds. Royalties 5 (ı) Real (II) Personal 6 a Gross rents 18,590 b Less rental expenses c Rental income or (loss) 18,590 d Net rental income or (loss) 18,590 (i) Securities (II) Other ۲, ۰ 7 a Gross amount from sales of assets other than inventory. 771,773 b Less: cost or other basis and sales expenses 732,038 c Gain or (loss) 39,735 d Net gain or (loss) 39,735 8 a Gross income from fundraising events **OTHER REVENUE** (not including \$ of contributions reported on line 1c) that a den See Part IV, line 18 **b** Less direct expenses . c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 1812 1 to '.'... 10a Gross sales of inventory, less returns and allowances 52,469 b Less cost of goods sold b 41,314. c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11a ROYALTIES/PRINTS 900099 512 512. b OTHER 900099 17 17 C d All other revenue e Total. Add lines 11a-11d 529 Total revenue. See instructions 0 81,953. 1,307,041 1,027,495

Page 10

Part IX Statement of Functional Expenses

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

Check it Schadule O contains a response or note to any line in this Part IX

Secti	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX											
	Check if Ochedule o Contains a fe	(A)	(B)	(C)	(D)							
6b, 7	ot include amounts reported on lines b, 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			was to get and the state of the	Total the second							
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			, ,	1 1 1 1 1 1 1 1							
5	Compensation of current officers, directors, trustees, and key employees	121,161.	0.	63,052.	58,109.							
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 .	729,634.	616,577.	106,421.	6,636.							
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1237001.	010,077.	100/121								
9	Other employee benefits	61,108.	41,133.	_ 16,338.	3,637.							
10	Payroll taxes .	59,521.	38,021.	16,451.	5,049.							
11	Fees for services (non-employees)											
	a Management .											
	Legal											
	Accounting .	31,105.	26,059.	4,380.	666.							
	Lobbying		20,039.	4,500.	000.							
	e Professional fundraising services See Part IV, line 17		1-1111-111-1	ज्यातीक्षेत्र देश स्वयं इत्त								
	Investment management fees		(I water W. Albania	12 12 14 15 14 15 14 15 15 15 15 15 15 15 15 15 15 15 15 15								
ģ	(A) amount, list line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0). Advertising and promotion	8,438.	8,438.									
13	Office expenses											
14	Information technology											
15	Royalties .		 	-								
16	Occupancy			 								
17	Travel	0 260	6 075	1 202	 							
18	Payments of travel or entertainment expenses for any federal, state, or local	8,268.	6,975.	1,293.								
19	public officials Conferences, conventions, and meetings	1,033.	1,033.									
20	Interest .											
21	Payments to affiliates											
22	Depreciation, depletion, and amortization	210,388.	175,012.	30,707.	4,669.							
23		36,658.	27,962.	7,701.	995.							
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	the transfer of the state of th	THE TANK							
	expenses on Schedule O) a Utilities & Telephone	95, 986.	25,376	70,009	601							
	b Germania Property	88,444.	45,376	88,444	601.							
	c Scholarships		44 040	00,444								
	d Equipment and Furnishings	44,940. 35,943.	44,940 11,665	24,014	704							
	e All other expenses See Sch. O	246,631.	463,705		. 264. 16,264.							
25	•	1,779,258.	1,486,896									
26	· · · · · · · · · · · · · · · · · · ·	2,773,230.	2,,200,000	133,112	35,536.							
BA		TEFADIIO 1	·	·	Form 990 (2013)							

33

34

4,666,338.

4,681,475

Form 990 (2013)

,136,649

5,223,423

33

34

BAA

Total net assets or fund balances

Total liabilities and net assets/fund balances

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) End of year Beginning of year 217,444 1 70,990. Cash - non-interest-bearing 11,705. Savings and temporary cash investments 144,400 2 106,069 3 34,833. 3 Pledges and grants receivable, net Accounts receivable, net 4 34,511. 12,372 Loans and other receivables from current and former officers, directors, 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 7 Notes and loans receivable, net Inventories for sale or use 45,658 8 50,315. 9 Prepaid expenses and deferred charges 11,918 7,035. 10 a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 6,458,929 **b** Less accumulated depreciation 10b 3,461,598 3,204,582 10 c 2,997,331 Investments - publicly traded securities 11 733,195 11 710,640. Investments - other securities See Part IV, line 11 12 12 Investments - program-related See Part IV, line 11 13 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 747,785 764,115. 16 Total assets. Add lines 1 through 15 (must equal line 34) 5,223,423 16 4,681,475. 17 Accounts payable and accrued expenses 17 81,624 9,207. Grants pavable 18 18 Deferred revenue 19 19 5,150 5,930. 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 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 Secured mortgages and notes payable to unrelated third parties 23 23 24 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 Total liabilities, Add lines 17 through 25 86,774 26 15,137 Organizations that follow SFAS 117 (ASC 958), check here > X and complete lines 27 through 29, and lines 33 and 34. بإبر Unrestricted net assets 271,915 27 957,800. 28 Temporarily restricted net assets 28 464,634 308,438. 29 Permanently restricted net assets 29 400,100. 400,100 Q R Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32

Form	990 (2013) MEXICAN AMERICAN CATHOLIC COLLEGE, INC. 74	<u>-1712</u>	<u>.528</u>		Page 1:	2
Par	t XI · · Reconciliation of Net Assets					_
	Check if Schedule O contains a response or note to any line in this Part XI .					1
1	Total revenue (must equal Part VIII, column (A), line 12)	1	L	1,307	,041	<u>. </u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	<u> </u>	1,779	, 258.	_
3	Revenue less expenses Subtract line 2 from line 1	3		-472	, 217	_
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		5,136	649	_
5	Net unrealized gains (losses) on investments .	5		1	,906	
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		4,666	5,33 <u>8</u>	<u>.</u>
Pa	t XII Financial Statements and Reporting				_	_
	Check if Schedule O contains a response or note to any line in this Part XII		<u> </u>			
				Y	es No	,
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			n it	1 0	
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			1 4		
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		•	2 a	X	_
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie separate basis, consolidated basis, or both:	wed on	а		4 3	
	Separate basis Consolidated basis Both consolidated and separate basis					-2-1
	b Were the organization's financial statements audited by an independent accountant?			2 b	x	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate	arate		्रम्	°121	
	basis, consolidated basis, or both			1 . [6]		1
	X Separate basis Consolidated basis Both consolidated and separate basis				<u> </u>	_1
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the auditorium, or compilation of its financial statements and selection of an independent accountant?	lıt,		2 c	х	_
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			77 77 200 300 300 300 300 300 300 300 300 300	۾ ڏِنا ، مند عند	ا ا : اعتد
3	a 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?			3 a	Х	<u>. </u>
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required a	udit				_
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		<u> </u>	3 b		_
BA	A			Form 9	90 (201	3)

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.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

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2	12.		S		25 (1 B

Name of the organization							Employer i	dentification	on number		
MEXICAN AMERICAN CAT								12528			
Part I Reason for Publi	c Charity Status	(All organizations r	<u>must co</u>	omplet	e this	part.)	See in	struction	ons		
The organization is not a private	e foundation because	it is (For lines 1 throu	igh 11, c	heck or	ly one b	(xo					
1 A church, convention	of churches or assoc	ation of churches desc	ribed in	section	170(b)(1)(A)(i).					
2 X A school described in	section 170(b)(1)(A)(ii). (Attach Schedule E.	.)								
3 A hospital or a cooper	rative hospital service	e organization described	d in sect	ion 170	(b)(1)(A)	(iii).					
4 A medical research or	ganization operated	in conjunction with a ho	ospital d	escribed	l ın sect	ion 170	(b)(1)(A)(iii). Ent	ter the hos	pital's	j
name, city, and state											
5 An organization operate 170(b)(1)(A)(iv). (Con	ed for the benefit of a complete Part II)	college or university owner	ed or ope	rated by	a govern	nmental	unit des	cribed in	section		
L J	-	vernmental unit describ									
	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.)										
=		0(b)(1)(A)(vi). (Complet		-							
from activities related t investment income ar June 30, 1975 See s	o its exempt functions nd unrelated business ection 509(a)(2). (Coi		ptions, a section 5	nd (2) n 511 tax)	more the from bu	nan 33-1 Isinesse	/3% of research	ts suppor	t from gross	S	ıfter
⊢	•	xclusively to test for pu		-							
more publicly support describes the type of	ted organizations des supporting organizat	isively for the benefit of, cribed in section 509(a) ion and complete lines)(1) or s 11e thro	ection 5 ough 11h	09(a)(2)	See s	ection 5	i09(a)(3).	Check the	box t	
	a ☐ Type I b ☐ Type II c ☐ Type III — Functionally integrated d ☐ Type III — Non-functionally integrated										
e By checking this box, other than foundation r section 509(a)(2)	I certify that the organisms and other that	anization is not controll an one or more publicly s	ed direc upported	tly or in organiz	directly ations de	oy one o scribed	or more in sectio	disquali n 509(a)(fied persor (1) or	ıs	
f If the organization rece check this box	•	nation from the IRS that is			•	•					
g Since August 17, 200	6, has the organizati	on accepted any gift of	r contrib	ution fro	om any o	of the to	ollowing	persons	,		
(i) A person who obelow, the gove	lirectly or indirectly co	ontrols, either alone or oported organization?	together	with pe	rsons d	escribed	d ın (ıı) a	and (III)	11 g (i)	Yes	No
(ii) A family memb	er of a person descri	oed in (i) above?							11 g (ii)		
(iii) A 35% controlle	ed entity of a person	described in (i) or (ii) a	bove?						11 g (iii)		
• •	•	e supported organization							119(11)		Щ_
(i) Name of supported organization	(II) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(IV) l organiz column (i your go	s the ation in) listed in overning ment?	(v) Did yo the organi column (i supp) of your	organiz colur	s the ration in (i) ed in the S ?	(vii) Amoun	netary	
			Yes	No	Yes	No	Yes	No			
(A)				<u></u>			<u></u>	_			
(B)											
··			 				 	 			
(C)			<u> </u>								
(D)			<u> </u>								
(E)											
···	400 0 100	12 Th 2 J. 18 18 18 18 18	The Line	等图形	11/1/2 4	**************************************	T.	113-11			
Total	1 1 1 1 1 1 1 1 1 1 1 1	操作的發展變		1	1		1				
BAA For Paperwork Reduction	on Act Notice, see th	e Instructions for Form	990 or	990-EZ.		- ;	Schedule	A (Form	990 or 990	EZ) 2	2013

Page 2

Schedule A (Form 990 or 990-EZ) 2013 MEXICAN AMERICAN CATHOLIC COLLEGE, INC. 74-1712528

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

oupport outcame for organizations become in economic in elasticity and in elasticity	,
(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	1e
organization fails to qualify under the tests listed below, please complete Part III.)	

Sect	on A. Public Support							
oegin	dar year (or fiscal year ning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
1 (Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')							
	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							
4	Total. Add lines 1 through 3							
	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)						The second second	
6	Public support. Subtract line 5 from line 4	17 to 18 to	A MARKET THE THE THE THE THE THE THE THE THE T	是一个特定。 可以可以	性组织			
Sect	tion B. Total Support							
Cale: begi:	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(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							
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			N. A. A.		南北州	4.	
12	Gross receipts from related acti	vities, etc (see ins	structions)			. [12	
13	First five years. If the Form 990 is organization, check this box and	for the organizatio	n's first, second, tl	nird, fourth, or fifth	tax year as a secti	on 501(c)(3)		▶ []
	tion C. Computation of Pu							
	Public support percentage for 2			ne 11, column (f))	ļ	14	<u>%</u>
	Public support percentage from					. [15	%
16 a	a 33-1/3% support test – 2013. I and stop here. The organization	f the organization n qualifies as a pu	did not check the iblicly supported i	e box on line 13, a organization	and the line 14 is	33-1/3% or n	nore, o	check this box
ŀ	33-1/3% support test – 2012. If and stop here. The organizatio	the organization on qualifies as a pu	did not check a b ublicly supported	ox on line 13 or 1 organization	6a, and line 15 is	33-1/3% or r	more,	check this box
17 :	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'fac	n meets the 'facts-	and-circumstance	es' test, check thi	s box and stop he	re. Explain ii	n Part	IV how
	o 10%-facts-and-circumstances or more, and if the organization organization meets the 'facts-a	n meets the 'facts- nd-circumstances'	and-circumstance test The organia	es' test, check thi zation qualifies as	s box and stop h e a publicly suppo	e re. Explain ii rted organiza	n Part tion	IV how the . ►
	Private foundation. If the organ	nization did not ch	eck a box on line	13, 16a, 16b, 17	· .—			
BAA	\				S	chedule A (Fo	orm 99	90 or 990-EZ) 2013

74-1712528

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)

Sect	ion A. Public Support						
	ar year (or fiscal yr beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants')						
	Gross receipts from admis-						
	sions, 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		-				
	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	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)	1. 特色的	とうない 大変な	4.特别特益	"""""	重新的	are construction of the co
	tion B. Total Support		,	, · · · · · · · · · · · · · · · · · · ·	,		
	dar year (or fiscal yr beginning in) >	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6				ļ		
10 8	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						
	c 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			İ		1	
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)		 	 	1	 	
14		is for the organiz	ation's first, seco	nd, third, fourth,	or fifth tax year as	a section 501	(c)(3) ►
	ction C. Computation of Pu						
15	Public support percentage for 2		-	ne 13, column (f))		15 %
16							16 %
	ction D. Computation of Inv						
	Investment income percentage			-	umn (f)) .	· -	17 %
18					•	· L_	18 %
	a 33-1/3% support tests — 2013. Is not more than 33-1/3%, chec	k this box and sto	op here. The orga	nızatıon qualıfıes	as a publicly supp	ported organiza	ation •
	b 33-1/3% support tests — 2012. I line 18 is not more than 33-1/39	%, check this box	and stop here. T	he organization q	ualifies as a publi	cly supported (organization . 🏲 📗
- ZU	Private foundation. If the organ	Lation did Not CN	CON A DOX ON TINE	14, 19a, or 19b,	check this box an	u see instruction	ліs <u>- [</u>

Schedule 🗛	(Form 990 or 990-EZ) 2013	MEXICAN AM	IERICAN CATI	HOLIC COLLEGE	I, INC.	74-1712528	Page 4
Part IV	Supplemental Informa or 17b; and Part III, Iir (See instructions).	ntion. Provide the 12. Also com	he explanation plete this par	ns required by F t for any addition	art II, line nal informa	10; Part II, line 17a ation.	
	~~~~~~						
				~ ~			
				·			
			·	· <b>-</b>			
						· <b>-</b>	<u>-</u> -
						· <b>-</b>	

# SCHEDULE D (Form 990)

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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

OMB No 1545 0047

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public

ME.X	ICAN AMERICAN CATHOLIC COLLEG	E, INC.			74-1712528	
Parl			er Similar Fu	nds or Acc		
411	Complete if the organization answ	vered 'Yes' to Form 990	, Part IV, line	6.		
		(a) Donor advised	funds	(b) F	unds and other ac	counts
1	Total number at end of year					<del></del>
2	Aggregate contributions to (during year)	<del></del>				
3	Aggregate grants from (during year)					
4	Aggregate value at end of year					<del></del>
5	Did the organization inform all donors and dor are the organization's property, subject to the	nor advisors in writing that the	assets held in d	lonor advised	funds Yes	□ No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit	rs, and donor advisors in writ	ing that grant fur	nds can be us er purpose co	nferring	
	impermissible private benefit?		<u> </u>		Yes	No No
<u>Par</u>	t II - Conservation Easements.	1.07 L. E 000		_		
	Complete if the organization ans			<del>.</del> /		<del></del>
1	Purpose(s) of conservation easements held by					
	Preservation of land for public use (e g , r	ecreation or education)	<b></b>		cally important land	d area
	Protection of natural habitat		Preservation	of a certified	historic structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization	held a qualified conservation co	ntribution in the fo	rm of a conse	rvation easement or	n the
	last day of the tax year			F . 1	11 11 -1 11 - F 1 -1	
	Tabel and based account of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the contr			<u> </u>	Held at the End of	the lax Year
	a Total number of conservation easements			2 a		
	b Total acreage restricted by conservation ease			2 b	·	
(	c Number of conservation easements on a cert	ified historic structure include	d in (a).	2 c		
(	d Number of conservation easements included structure listed in the National Register	•		2 d		<del>-</del>
3	Number of conservation easements modified, traitax year	nsferred, released, extinguished	, or terminated by	the organizati	ion during the	
4	Number of states where property subject to conse	ervation easement is located 🕨		_		
5	Does the organization have a written policy re	egarding the periodic monitori	ng, inspection, h	andling of vic		
	and enforcement of the conservation easeme				Yes	∐ No
6	Staff and volunteer hours devoted to monitoring,	inspecting, and enforcing conse	ervation easement	s during the ye	ear	
7	Amount of expenses incurred in monitoring, insp ►\$	ecting, and enforcing conservat	ion easements dui	ring the year		
8	Does each conservation easement reported of and section 170(h)(4)(B)(ii)?	on line 2(d) above satisfy the	requirements of s	section 170(h 	)(4)(B)(ı) · · · · · [ Yes	No
9	In Part XIII, describe how the organization report include, if applicable, the text of the footnote	is conservation easements in its to the organization's financia	revenue and expo Il statements that	ense statemer t describes th	nt, and balance shee ne organization's a	et, and ccounting for
Pa	rt III Organizations Maintaining Collection Complete if the organization and	ections of Art, Historica	I Treasures, o	or Other Si	milar Assets.	<del></del>
1	a If the organization elected, as permitted under art, historical treasures, or other similar assets h	er SFAS 116 (ASC 958), not t	o report in its rev	venue statem	ent and balance s	heet works of
	in Part XIII, the text of the footnote to its final bif the organization elected, as permitted und	ancial statements that describ	es these items			•
	historical treasures, or other similar assets held following amounts relating to these items:	for public exhibition, education,	or research in furt	therance of pu	iblic service, provide	e the
	(i) Revenues included in Form 990, Part VII	I, line 1			►\$_	18,884
	(ii) Assets included in Form 990, Part X				▶\$	764,115
2	If the organization received or held works of art, amounts required to be reported under SFAS	historical treasures, or other sii 3 116 (ASC 958) relating to th	milar assets for fin	iancial gain, p	rovide the following	
	a Revenues included in Form 990, Part VIII, lir	_			▶\$	
	b Assets included in Form 990, Part X				▶\$	<del></del>

Schedule D (Form 990) 2013 MEXIC Partill Organizations Mainta	CAN AMERICAN ( ining Collections	CATHOLIC CO	OLLEG orical	E, INC. Treasures, or	74-171 Other Similar Ass			
3 Using the organization's acquisition items (check all that apply)	, accession, and other	records, check a	ny of the	e following that ar	e a significant use of its	collection		
a Public exhibition		<b>d</b> Loan	or exch	ange programs				
<b>b</b> X Scholarly research		e X Other	Lib	rary books	used by stude	nts		
c X Preservation for future gener								
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII  See Part XIII								
5 During the year, did the organiza to be sold to raise funds rather the	tion solicit or receive nan to be maintained	e donations of ar I as part of the c	t, histor Irganiza	rical treasures, o ition's collection?	r other similar assets	Yes X No		
Rartive Escrow and Custodia line 9, or reported an	Arrangements.	Complete if t	he org	ganization and				
1 a Is the organization an agent, trus on Form 990, Part X?					er assets not included	Yes No		
<b>b</b> If 'Yes,' explain the arrangement	in Part XIII and com	plete the follow	ng table	•				
_						Amount		
c Beginning balance		•			1c			
d Additions during the year		•			1 d	<del></del>		
e Distributions during the year		•			1 e			
<ul><li>f Ending balance</li><li>2a Did the organization include an a</li></ul>	mount on Form 000	Part V June 213	)		11	No.		
<b>b</b> If 'Yes,' explain the arrangement				s boon provided	in Part VIII	∐ Yes		
bit res, explain the arrangement	III FAIL AIII CHECK I	iere ii tile explai	ilion na	s been provided	III Fait Aiii			
Partiva Endowment Funds. C	omplete if the or	ganization ar	swere	d 'Yes' to For	m 990 Part IV Jir	ne 10		
	(a) Current year	(b) Prior yea		(c) Two years back		(e) Four years back		
1 a Beginning of year balance	946,963.	1,479,5		1,827,007				
<b>b</b> Contributions	2,708.	2,5		3,064		. 2,516.		
c Net investment earnings, gains, and losses	64,740.	54,8	10.	65,455	5. 153,723			
<b>d</b> Grants or scholarships.				•				
e Other expenditures for facilities and programs	220,000.	590,0	00.	415,949	539,457	. 725,000.		
f Administrative expenses								
g End of year balance	794,411.	946,9		1,479,577		. 2,209,457.		
2 Provide the estimated percentage		_	ne 1g, c	olumn (a)) held a	as			
a Board designated or quasi-endowme		5.00 %						
<b>b</b> Permanent endowment ►	51.00 %	~ °						
c Temporarily restricted endowmen The percentages in lines 2a, 2b,								
3a Are there endowment funds not in the organization by	ne possession of the c	irganization that a	are held	and administered	for the	Yes No		
(i) unrelated organizations						3a(i) X		
(ii) related organizations						3a(ii) X		
<b>b</b> If 'Yes' to 3a(II), are the related of						3b		
4 Describe in Part XIII the intended		ation's endowme	ent fund	s. See Part	t XIII			
Land, Buildings, and I Complete if the organi		'Yes' to Forn	n 990,	Part IV, line	11a. See Form 996	D, Part X, line 10.		
Description of property	(a) Cos	t or other basis vestment)	(b) (	Cost or other isis (other)	(c) Accumulated depreciation	(d) Book value		
1 a Land				216,062.		216,062.		
<b>b</b> Buildings			4	,839,318.	2,421,273.	2,418,045.		
c Leasehold improvements				429,574.	180,595.	248, 979.		
d Equipment				446,709.	352,860.	93,849.		
e Other			. –	527,266.	506,870.	20,396.		
Total. Add lines 1a through 1e (Colum BAA	n (d) must equal Foi	m 990, Part X, o	column	(B), line 10(c)).	<u> </u>	2,997,331.		
PAA					Sched	ule <b>D</b> (Form 990) 2013		

Part VII Investments - Other Securities.	l'Ves' to Form 990	N/A Part IV, line 11b. See Form 990, Part X, Ii	no 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(1) Financial derivatives	(b) book value	(C) Method of Valuation Cost of end-of-year market value	
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)	<del></del>	<del></del>	
<u>`</u> (C)			
(D)	~		
(E)			
(F)			
(G)			
(H)			
<u>(l)</u>			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)	<u> </u>	the theory of the tenth of the	
Part VIII Investments — Program Related. Complete if the organization answere	d 'Yes' to Form 990	N/A Part IV line 11c See Form 990 Part X li	ine 13
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year marke	t value
(1)	1		
(2)	<del></del>		
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13)	<b>-</b>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<del></del>
	d 'Yes' to Form 990 escription	0, Part IV, line 11d. See Form 990, Part X, I (b) Book v 764	
(5)			
(6)			
(7)			
(8)	<del></del>		
(9) (10)			
Total. (Column (b) must equal Form 990, Part X, column	(P) Imp 15 )	▶ 76.	/ 11C
Part X Other Liabilities. Complete if the organization answered 'Yes' to			4,115
(a) Description of liability	(b) Book value	Te of 111. See Form 550, Part A, fille 25	<del>, , , , , , , , , , , , , , , , , , , </del>
(1) Federal income taxes	(=) 20011 10101	· Age is everythingly affect the first to be a sense of	(fil. file).
(2)			1. t.L.
(3)		रिन क्ले के हिन्दु हैं। कि दे	,,,
(4)			
(5) (6)			40.40
(7)	<del>-   </del>	一一一个人,他们是一个人们是一个人	शु मि
(8)			į.
(9)		11 11 11 11 11 11 11 11 11 11 11 11 11	11. 14
(10)			1. [
(11)		ा किया है। जिल्ला के प्रतिस्था	, e, t*,
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	<b>•</b>	the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	
2. Liability for uncertain tax positions. In Part XIII, provide the text of the			taın
tax positions under FIN 48 (ASC 740) Check here if the text of the footno	te has been provided in Part X	Schodula D (Form 9	]

___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

Schedule **D** (Form 990) 2013

BAA

Schedule D (Form 990) 2013 MEXICAN AMERICAN CATHOLIC COLLEGE,	INC.	74-1712528	Page 5
Part XIII · Supplemental Information (continued)			
Part V, Line 4 - Intended Uses Of Endowment Fund (continued)		<b>~~</b> -	
and building of the student body.			
		- <del>-</del> <del></del>	

#### 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

2013

Operato Public

Department of the Treasury Internal Revenue Service Name of the organization

► Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form 990.

Employer identification number

	XICAN AMERICAN CATHOLIC COLLEGE, INC. [74-171	2528			
Pa	rt I				
				YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, byla governing instrument, or in a resolution of its governing body?	ws, other	1	х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its broccatalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	hures,	2	X	第二
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media duit 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	ing the	, f	W. 1952	X
4	The organization is a bonafide religious school that publicizes its racially nondiscriminatory policy on its circulars including its annu Academic Catalog, its Student Handbook, and the organization's websit The organization meets the exemption of Rev. Proc. 75-50, 1975-2 C.B. section 4.03, subsection 2(a).  Does the organization maintain the following?	e			
	a Records indicating the racial composition of the student body, faculty, and administrative staff?		4 a	X	
	<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		4b		
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		4 c	<b>X</b> _	
	d Copies of all material used by the organization or on its behalf to solicit contributions?		4 d	Х	
	If you answered 'No' to any of the above, please explain. If you need more space, use Part II.				
				i.	
5	Does the organization discriminate by race in any way with respect to.  a Students' rights or privileges?		5a		X
	<b>b</b> Admissions policies?		5 b		Х
	c Employment of faculty or administrative staff?		5с		X
	d Scholarships or other financial assistance?		5 d		X
	e Educational policies?		5 e		X
	f Use of facilities?		5f		X
	g Athletic programs? .	•	_ 5 g		Х
	h Other extracurricular activities?	_	5h		х
	If you answered 'Yes' to any of the above, please explain. If you need more space, use Part II		-		
			Ġ.		7.7
			4		
			4		
6	a Does the organization receive any financial aid or assistance from a governmental agency?		6a	- A - A - A - A - A - A - A - A - A - A	X
	b Has the organization's right to such aid ever been revoked or suspended?	• • •	6 b		X
		• • •	100 m	\$ 25°5 A.Fr.	A 53
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	

Schedule E	E (Form 990 o	r 990-EZ) 201	3 MEXICA	N AMERICA	N CATHOLI	C COLLEGE	, INC.	74-1712528	Page 2
Part II	<b>Supplemen</b> applicable.	<b>tal Informa</b> Also comp	ation. Provi lete this pa	ide the expl art to provid	anations red e any other	quired by Pa additional ir	rt I, lines 3 iformation	74-1712528 3, 4d, 5h, 6b, and 7, (see instructions).	as
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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.
 ► Information about Schedule L (Form 990 or 990-EZ) and its instructions is

2013

at www.irs.gov/form990.

Open to Public Inspection ?

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

> (5) (6)

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) Relationship between disqualified	(c) Description of transaction	(d) Corrected?						
		person and organization		Yes	No					
(1)										
(2)										
(3)										
(4)					]					

2 Enter the amount of tax incurred by 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

►s

Part II Loans to and/or From Interested Persons.

MEXICAN AMERICAN CATHOLIC COLLEGE, INC

Complete if the organization answered 'Yes' on Form 990-EZ, Page V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	rpose (d) Loan to or from the organization?		oan to or (e) Original om the principal amount nization?	(f) Balance due	(g) In (	default?	(h) Ap by bo comm	ard or I	(ı) Wi agreei	ritten nent?
	]		То	From		Yes	No	Yes	No	Yes	No	
(1)												
(2) (3)												
(3)			1									
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(5)												
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(7)												
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(9)												
(10)												
Total			·	.,	. ▶\$		وز ميد	Jr 5 3	رِ الْ	For the	14	* أَرْبُلُوا

Part III Grants or Assistance Benefiting 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 of assistance	(d) Type of Assistance	(e) Purpose of assistance
(1)				<del> </del>	
(2)					
(3)					
(4)					
(5)					
(6)					
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(8)					
(9)	_				
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BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2013

Page 2 Schedule L (Form 990 or 990-EZ) 2013 MEXICAN AMERICAN CATHOLIC COLLEGE, 74-1712528 Part IV Business Transactions Involving Interested Persons. Complete if the organization answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c. (b) Relationship between interested person and the organization (c) Amount of transaction (e) Sharing of organization's revenues? (a) Name of interested person (d) Description of transaction Yes No (1) Very Rev. Jeff Pehl Purchases of Services X Board Member 56,453. (2) Archbishop Siller 110,000. Diaconate Tuition X Board Member (3) (4) (5) (6) (7) (8) (9) (10)Part V Supplemental Information Provide additional information for responses to questions on Schedule L (see instructions).

#### **SCHEDULE O** (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2013

OMB No 1545-0047

Open to Public Inspection &

Department of the Treasury Internal Revenue Service Name of the organization

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Employer identification number

74-1712528 MEXICAN AMERICAN CATHOLIC COLLEGE, INC Form 990, Part III, Line 1 - Organization Mission The College's mission is "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/or Master of Arts degree in Pastoral Ministry". Further the College offers intensive Pastoral English and Spanish courses and engages in research projects which parallel. In accomplishing this mission the College offers educational classes, workshops and symposiums which focus on pastoral and mutlicultural training. 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-officio seat, through the Archbishop of San Antonio and the Seminary's Rector, on the Board of Trustees 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 11b - 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	Employer identification number
MEXICAN AMERICAN CATHOLIC COLLEGE, INC.	74-1712528
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Cor	uflicts
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 the Responsible Pers	son is involved in
that he or she believes could contribute to a Conflict of Inter	rest. Each new
Responsible Person to the organization shall be required to re-	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	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	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 p	osition. The
President and CEO performs the hiring of all other staff of th	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.	

2013

2/10/15

### **Schedule O - Supplemental Information**

Page 1

Client-00000256

MEXICAN AMERICAN CATHOLIC COLLEGE, INC.

74-1712528

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Form 990, Part IX, Line 24e Other Expenses

	(A)	_ (B)	(C)	(D)
	m	Program	Management	
	Total	Services	& General	<u>Fundraising</u>
Accreditation				
Allocation of Plant/Facili		294,246.	-302,096.	7,850.
Auto Expense	1,687.	194.	1,493.	
Bank Charges	7,834.	7,646.	188.	
Bishop's Reception Expense	5,521.	5,521.		
Bricks				
Consultants/Contract Labor	33,862.	32,594.	1,268.	
Donated Books	6,082.	6,082.		
Dues & Subscriptions	3,683.	2,825.	733.	125.
Educational Materials	858.	858.		
Food Service	30,935.	30,935.		
Graduation Expenses	314.	314.		
HM21st Century	19,027.	19,027.		
Homelitics	565.	565.		
Hospitality	8,664.	8,458.	206.	
Housekeeping Supplies	3,374.	3,374.		
Library Resources	4,612.	4,612.		
MACC Board	899.		899.	
Maintenance and Grounds	14,271.		14,271.	
Miscellaneous			·	
Office Supplies	5,800.	4,750.	913.	137.
Payroll/Human Resources	26,513.	15,288.	8,101.	3,124.
Postage and Shipping	2,997.	1,386.	363.	1,248.
Printing and Publications	13,055.	8,961.	705.	3,389.
Professional Fees	18,223.	3,024.	15,199.	•
Public Relations	236.	43.	95.	98 <i>.</i>
Remediation				
Repairs & Maintenance	17,316.		17,316.	
Security	3,385.		3,385.	
Solicitation Expense	•		•	
Staff Development	8,040.	5,625.	2,122.	293 <i>.</i>
Technology	7,377.	7,377.	•	
Uncollected	_ 1,501.		1,501.	
	Total \$ 246,631.	\$ 463,705.	\$ -233,338.	\$ 16,264.

### Form **8868**

(Rev January 2014)

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.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No 1545-1709

	e filing for an <b>Automatic 3-Month Extension, cor</b> e filing for an <b>Additional (Not Automatic) 3-Mont</b>			is form)	<b>►</b> X
	plete Part II unless you have already been grante				
Electronic fill corporation r request an ex Associated V	ling (e-file). You can electronically file Form 8868 required to file Form 990-T), or an additional (not tension of time to file any of the forms listed in Part Vith Certain Personal Benefit Contracts, which mng of this form, visit www irs.gov/efile and click of this form, visit www irs.gov/efile and click of the contracts.	If you nee automatic) or Part II v ust be sent	d a 3-month automatic extension of time 3-month extension of time. You can ele with the exception of Form 8870, Information to the IRS in paper format (see instruct	to file (6 months for ectronically file Form Return for Transfers	
Part I	Automatic 3-Month Extension of Time	. Only sul	omit original (no copies needed).		
A corporation	n required to file Form 990-T and requesting an a	automatic 6	-month extension — check this box and	complete Part I only	, <b>-</b> [
All other corp income tax r	porations (including 1120-C filers), partnerships, eturns	REMICs, a			
	Name of exempt organization or other filer, see instructions		Enter filer's identif	fying number, see in Employer identification in	
Type or	Employer definitional in				
print File by the		EXICAN AMERICAN CATHOLIC COLLEGE, INC.  mber, street, and room or suite number. If a PO box, see instructions.			
due date for filing your	3115 WEST ASHBY PLACE				
return See	City, town or post office, state, and ZIP code For a foreign add	ress, see instru	ections		
instructions	SAN ANTONIO, TX 78228		_		
Enter the Re	turn code for the return that this application is fo	r (file a sep	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-BL		02	Form 1041-A		08
Form 4720 (Individual)		03	Form 4720 (other than individual)		09
Form 990-PF		04	Form 5227	<del> </del>	10
Form 990-T (section 401(a) or 408(a) trust)		05	Form 6069		11
Form 990-1	(trust other than above)	06	Form 8870	=	12
Telephone If the org If this is check this the exter  Treques until The ex	ission is for.  st an automatic 3-month (6 months for a corporation  3/15, 20 15, to file the exempt orgations is for the organization's return for calendar year 20 or	Fax No siness in the digit Group theck this be required to anization re	Exemption Number (GEN) . If ox ■ and attach a list with the natural file Form 990-T) extension of time turn for the organization named above	this is for the whole mes and EINs of all	J , ,
► X 2 If the ta	tax year beginning $8/01$ , 20 $13$ ax year entered in line 1 is for less than 12 montange in accounting period			al return	
3a If this a	application is for Forms 990-BL, 990-PF, 990-T, 4 undable credits. See instructions.	1720, or 606	59, enter the tentative tax, less any	3a\$	0.

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

b If this application is for Forms 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

c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions

0.

0.

3b \$

3 c \$