

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990

For the 2014 calendar year, or tax year beginning

Return of Organization Exempt From Income Tax

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

8/01

▶ 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.

, 2014, and ending

7/31

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Check if applicable:

Open to Public Inspection

0

, 2015

D Employer identification number

	Ad	Idress change	MEXICAN AMERICAN CATHOLIC COLLEGE, INC.	<u> </u>	74-171	2528
	Na	ime change	3115 WEST ASHBY PLACE	E	elephone nu	mber
	lni	tial return	SAN ANTONIO, TX 78228	1	(210)	732-2156
	Fina	al return/terminated				
	Пап	nended return		l G d	Gross receipts	\$ 2,891,881.
	H-1	plication pending	F Name and address of principal officer:	H(a) Is this a grou		
	□ '	,		H(b) Are all subore If 'No,' attach	linates includ	
ī	Tax-e	exempt status	X 501(c)(3) 501(c) () 4947(a)(1) or 527	If 'No,' attach	a list (see i	nstructions) ——
Ţ				H(c) Group exemp	tion number	▶ 0928
ĸ		of organization	X Corporation Trust Association Other L Year of formati		,	f legal domicile TX
	art I	Summar				
بندا	1	Briefly describ	be the organization's mission or most significant activities: The College	ege's mis	sion i	s "To empower
a.	1		ate leaders for service in a culturally divers			
Activities & Governance	1		a bi-literate, multi-clutural formation progr			
773]		of Arts and/or Master of Arts degree in Pasto			
Se	2	Check this bo	if the organization discontinued its operations or disposed of mo	re than 25% o	fits net a	ssets.
Ğ	3 [ting members of the governing body (Part VI, line 1a)			15
φ, φ	4 [lependent voting members of the governing body (Part VI, line 1b)			12
ii:	5		of individuals employed in calendar year 2014 (Part V, line 2a)			38
寰	6		of volunteers (estimate if necessary)			12
Ā			business taxable income from Form 990-T-line 34.			0.
	- B 1	vet unrelated	Dusiness taxable income non Form 930-7-interaction	Prior Y		Current Year
	8 (Contributions	and grants (Part VIII, line 1h)		7,593.	
ē					7,393. 6,340.	902,911.
en.	10	nvestment in	ce revenue (Part VIII, line 2g) 13 \$10 \forall 2 5 2015 \$10 \forall 2 5 2015		2,834.	
Revenue	11 (Other revenue	(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0,274.	54,066. 22,709.
_			- add lines 8 through 11 (must equal Part VIII, column (A), line (12)		7,041.	2,418,166.
			milar amounts paid (Part IX, column (A), lines-1-3)	1,30	7,041.	2,410,100.
			to or for members (Part IX, column (A), line 4)			
		•	compensation, employee benefits (Part IX, column (A), lines 5-10)	97	1,424.	1,152,408.
ses			undraising fees (Part IX, column (A), line 11e)	7.	.,	
Expenses						
X						
			s (Part IX, column (A), lines 11a-11d, 11f-24e)		7,834.	877,901.
- 1		· ·	s. Add lines 13-17 (must equal Part IX, column (A), line 25)		258.	2,030,309.
7.8	19 R	evenue less e	expenses. Subtract line 18 from line 12		2,217.	387,857.
Assets or	00 T	(F	and V. Loro 1C)	Beginning of Cu		End of Year
Aes			Part X, line 16)		475.	5,083,781.
Net /					,137.	23,986.
		,	und balances. Subtract line 21 from line 20	4,666	,338.	5,059,795.
Pa		Signature				
Under	r penalties lete, Deck	s of perjury, I decl aration of prepare	are that I have examined this return, including accompanying schedules and statements, and to the r (other than officer) is based on all information of which preparer has any knowledge.	e best of my knowle	dge and bei	ief, it is true, correct, and
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c:~		Signature	of officer	Date	1 2013	
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1101	C		Arturo Chavez, Ph.D.			
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	parer Only	Firm's name	Garza, Preis & Co.	 	-	0405540
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			return with the preparer shown above? (see instructions)	<u></u>		X Yes No
BAA	For Pa	aperwork Rec	luction Act Notice, see the separate instructions. TEEAC	0113L 05/28/14		Form 990 (2014) /

			MEXIC										NC.						74-	17.	1252	28		Page 2
Pai	<u>t III</u>	_	tement c		_				•															
			ck if Sched					ise or i	note	to an	y line	e in th	ıs Pa	rt III										X
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	<u>"See</u>	Sch	edule_C																					
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4	Sect	tion 501	e organiza (c)(3) and e, if any, f	l 501((c)(4) c	organiz	ations	are re	equire	ments ed to	for e	each c	of its t amou	hree la	arge gran	est pro ts and	gram I alloc	servic cations	ces, as to oth	s me ners	easur , the	ed by total (expe expen	nses ises,
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	·		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	
	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		Х
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 'Yes,' complete Schedule C, Part II</i>	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 I	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, VIII, IX, or X as applicable	(y) \$ \$	ii)koja 173	ر اور اور
ā	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	
ł	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
	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		•
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
	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	
	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 b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	X	
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
t	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
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Checklist of Required Schedules (continued) No Yes Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I. Parts I and II 21 Х Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III X 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 I 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, 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? 240 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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I Х 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 Schedule L, Part I Х 25b 26 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 'Yes', complete Schedule L, Part II 26 X 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 X 27 当前 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 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 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M Х 30 X 31 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 32 Schedule N, Part II Х 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I Х 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 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 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 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 Х 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197

38

Check if 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	0	ļ		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1 c		
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2 a	38			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2 b	Х	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	Ī			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3 a		Х
b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	Γ.	3 b		
4 a 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)	1)2	4 a		х
b If 'Yes,' enter the name of the foreign country: ▶				
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR))			
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	L	5 a		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?	1	5 c		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organ solicit any contributions that were not tax deductible as charitable contributions?	ızatıon	6 a		х
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).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods a services provided to the payor?	ınd	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	1			
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		Х
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C?		7 h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	3	8		
9 Sponsoring organizations maintaining donor advised funds.	ļ,			
a Did the sponsoring organization make any taxable distributions under section 4966?	ľ	9 a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	-	9 b	-+	
10 Section 501(c)(7) organizations. Enter	Ī			
a Initiation fees and capital contributions included on Part VIII, line 12	l l	1	l	
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			- 1	
a Gross income from members or shareholders		-		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11 b				
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12 a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b				
13 Section 501(c)(29) qualified nonprofit health insurance issuers.				
a is the organization licensed to issue qualified health plans in more than one state?		13a		
Note. See the instructions for additional information the organization must report on Schedule 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 c Enter the amount of reserves on hand				
		14-		X
14a Did the organization receive any payments for indoor tanning services during the tax year? • If 'Yes' has it filed a Form 720 to report these payments? If 'No ' provide an explanation in Schodulo O.	-	14a		
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O TEEA0105L 05/28/14		14b Form	990 (201/
ILLAVIVUL VUIZOI14			(4	1 →

Form 990 (2014) MEXICAN AMERICAN CATHOLIC COLLEGE, INC. 74-1712528 Page 6 Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to līne 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 Х Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year 15 ` "... If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O **b** Enter the number of voting members included in line 1a, above, who are independent 1 b 12 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 since the prior Form 990 was filed? 4 Х Did the organization become aware during the year of a significant diversion of the organization's assets? X 5 Did the organization have members or stockholders? 6 Х 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 persons other than the governing body? 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8a Х **b** Each committee with authority to act on behalf of the governing body? X 8 b 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 Х 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10 a Х 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 filing the form? 11 a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 學習 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 Х 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 See Schedule O Schedule O how this was done. 120 Х 13 Did the organization have a written whistleblower policy? 13 X 14 Did the organization have a written document retention and destruction policy? 14 X 15 Did the process for determining compensation of the following persons include a review and approval by independent 经验的 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official X 15 a **b** Other officers or key employees of the organization See Schedule O Х 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 114 participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16_b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Another's website Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year See Schedule 0 State the name, address, and telephone number of the person who possesses the organization's books and records

San Antonio TX 78228 (210) 732-2156

Clemencia Barrera 3115 West Ashby Place

Form 990 (2014)	MEXICAN	AMERICAN	CATHOLIC	COLLEGE	TNC

74-1712528

Page 7

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 nor any relati	ed organız	ation	con	npen	sate	ed any	y cu	rrent officer, directo	or, or trustee.	
				(C))					
(A) Name and Title	(B) Average hours per	thai	one both dir	box, an o ector	unles officer truste		on	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	week (list any hours for related organiza- tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Dr. Glenn E. James	11									
Director	0	X						0.	0.	0.
(2) Mr. Arturo Chavez, PhD	_ 55									
President & CEO	0	X		X				112,112.	0.	7,908.
(3) Sister Rose Weidenbenner, RSM	1_									
Director	0	X						0.	0.	0.
(4) Rev. David Garcia	1									
Director	0	X						0.	0.	0.
(5) Ms. Joan F. Neal	1									
Director	0	X						0.	0.	0.
(6) Dr. R. Scott Woodard	1									
Director	0	X						0.	0.	0.
(7) Most Rev. Oscar Cantu, STD	1									
Chairman	0	X						0.	0.	0.
(8) Most Rev. John C. Wester	1									
Director	0	X						0.	0.	0.
(9) Most Rev. Gustavo Garcia-Sille	1									
Ex-Officio Dir.	0	Х						0.	0.	0.
(10) Very Rev. Jeff Pehl	1									
Ex-Officio Dir.	0	X						0.	0.	0.
(11) Most Rev. Jose H. Gomez, S.T.D.	1									
Director	0	Х						0.	0.	0.
(12) Ms. Ana Novoa	1									
Vice Chair	0	Х						0.	0.	0.
(13) John Bruce, CPA	1									
Secretary/Treas	0	Х						0.	0.	0.
(14) William C. Rainford, Ph.D.	11									
Director	0	X						0.	0.	0.

Page 8

Part VII Section A. Officers, Directors, Tru	istees, (B)	Key	En	ıplo ()		es,	and	d Highest Com	pensated Emp	loyees (continued)
(A) Name and title	Average hours per week	offic	, unle	Pos check ess pe	sition more erson direct	than is both or/trus	h an tee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	(list any 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) Veronica Rayas, Ph.D. Director	1	х						0.	0.	0
(16)										
(17)					_					
(18)										
(19)										
(20)		-								
(21)										
(22)										
(23)										
(24)									,	
(25)		 								
1 b Sub-total		ļ	Li	L	<u> </u>		>	112,112.	0.	7,908
c Total from continuation sheets to Part VII, Section	on A						▶	0.	0.	0
d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited	to those li	sted	abov	ve) v	vho	recen	▶ ved	112,112. more than \$100,00	0. 0 of reportable comp	7,908.
from the organization 1										
3 Did the organization list any former officer, direction line 1a? If 'Yes,' complete Schedule J for suc	tor, or tru <i>h ındıvıdu</i>	stee, <i>al</i>	key	/ em	ploy	/ee,	or h	nghest compensat	ted employee	Yes No
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	reportabler than \$1	le co 50,00	mpe 00?	ensa If 'Y	tion ′es′	and com	oth olet	er compensation e Schedule J for	from	4 X
5 Did any person listed on line 1a receive or accruing for services rendered to the organization? If 'Yes	e compen s,' comple	satio te Sc	n fre	om a Iule	any <i>J fo</i>	unre r suc	late h p	d organization or erson	ındıvıdual	144 X
Section B. Independent Contractors										
1 Complete this table for your five highest compen- compensation from the organization. Report compen	sated inde sation for t	epend the ca	deni aleni	t cor dar y	ntrad year	ctors endir	tha ng w	it received more th with or within the or	nan \$100,000 of ganization's tax yeai	•
(A) Name and business addr	ress							(B) Description o	of services	(C) Compensation
					_					
2 Total number of independent contractors (including b		ted to	tho	se li	sted	abov	ve) v	who received more	than	
\$100,000 of compensation from the organization		TEFAO		02/2					, p	Form 990 (2014

Form 990 (2014) MEXICAN AMERICAN CATHOLIC COLLEGE, INC. 74-1712528 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) Total revenue (D) (B) (C) Revenue excluded from tax Related or Unrelated exempt business under sections 512-514 function revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1 a **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 902,911 g Noncash contributions included in lines 1a-1f 2,413 h Total. Add lines 1a-1f 902,911 Program Service Revenue **Business Code** 2a Tuition and Fees 611600 ,129,377. 1,129,377 b Room and Board 611600 306,088 306,088 c Translations/Homiletics 611600 2,615 2,615 d Consulting Services 611600 400 400 f All other program service revenue g Total. Add lines 2a-2f 1,438,480 Investment income (including dividends, interest and other similar amounts) 13,069 13,069 Income from investment of tax-exempt bond proceeds. Royalties (ı) Real (II) Personal 6 a Gross rents 12,750 b Less rental expenses c Rental income or (loss) 12,750 d Net rental income or (loss) 12,750 12,750 (i) Securities (II) Other 7 a Gross amount from sales of assets other than inventory 460,782 **b** Less cost or other basis and sales expenses 419,785 c Gain or (loss) 40,997 d Net gain or (loss) 40,997 40,997 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 **b** Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 **b** Less direct expenses h c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 62,491 b Less cost of goods sold b 53,930 c Net income or (loss) from sales of inventory 8,561 8,561 Miscellaneous Revenue **Business Code** 11a ROYALTIES/PRINTS 900099 924 924. **b** OTHER 900099 474 474

d All other revenue e Total. Add lines 11a-11d

Total revenue. See instructions

1,398

1,447,041

2,418,166.

0

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX X (D) (B) (C) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Total expenses Program service Management and Fundráising expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members. Compensation of current officers, directors, 0 trustees, and key employees 124,610 64,847 59,763. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 n 0 Other salaries and wages 24,521. 873,941 733,934 115,486 Pension plan accruals and contributions (include section 401(k) and 403(b) èmployer contributions) Other employee benefits. 9 14,703 5,602. 83,804 63,499 Payroll taxes 70,053 49,945 13,198 6,910. 11 Fees for services (non-employees) a Management **b** Legal c Accounting 7,033 697. 44,143 36,413 **d** Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule (0) Advertising and promotion 12 1,262 200. 1,462 Office expenses. 14 Information technology Royalties Occupancy 16 17 17,357 7,291 10,066 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 9,623 9,623 Interest 20 21 Payments to affiliates Depreciation, depletion, and amortization 2,764 22 222,408 216,189 3,455 Insurance 30,415 22,457 7,157 801 Other expenses Itemize expenses not 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) a <u>Utilities & Telephone</u> 92,934 26,396 64,672 1,866. b Consultants/Contract Labor 81,518 59,490 22,028 c Food Service_ 69,746 69,746 d Scholarships 59,000 59,000 Şee Şch. O 249,295 369,984. -162,027.41,338. e All other expenses 25 Total functional expenses. Add lines 1 through 24e 2,030,309 1,725,229. 144,462. 160,618. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here -If following SOP 98-2 (ASC 958-720)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year (B) End of year Cash - non-interest-bearing 70,990 405,985. 2 Savings and temporary cash investments 11,705 2 91,361. 3 Pledges and grants receivable, net 3 34,833. 144,834. Accounts receivable, net 4 59,088 34,511 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 Inventories for sale or use 8 50,315 45,403. Prepaid expenses and deferred charges 2,019 9 7.035 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 6,400,255 **b** Less accumulated depreciation 10b $3,558,42\overline{6}$ 2,997,331 10 c ,841,829 Investments - publicly traded securities 11 710,640 11 723,193. Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 Intangible assets 14 14 15 Other assets See Part IV, line 11 764,115 15 770,069. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 4,681,475 5,083,781. 17 Accounts payable and accrued expenses $9,\overline{207}$ 17 17,341 18 Grants payable 18 Deferred revenue 19 5,930 19 3,446. 20 Tax-exempt bond liabilities. 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Liabilitie 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 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 25 3,199. Total liabilities. Add lines 17 through 25 15,137 26 23,986 Organizations that follow SFAS 117 (ASC 958), check here > X and complete Balances lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 3,957,800. 3,689,561. Temporarily restricted net assets 28 308,438. 28 970,134. Fund 29 Permanently restricted net assets 29 400,100 400,100 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34. þ Capital stock or trust principal, or current funds 30 30 Assets Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 ¥ E 33 Total net assets or fund balances 4,666,338. 33 5,059,795. Total liabilities and net assets/fund balances 34 4,681,475 34 5,083,781. BAA Form 990 (2014)

		-1712528		Page 12
Pai	teXI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI	_		\Box
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,418	,166.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,030	,309.
3	Revenue less expenses Subtract line 2 from line 1	3	387	,857.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,666	,338.
5	Net unrealized gains (losses) on investments	5	5	,600.
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	5,059	,795.
Pa	祝秋川劇 Financial Statements and Reporting		,	
	Check if Schedule O contains a response or note to any line 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			i i
2 8	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 Separate basis Both consolidated and separate basis	wed on a		
(b Were the organization's financial statements audited by an independent accountant?		2b 3	〈
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both X Separate basis Both consolidated and separate basis	arate		
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audience, or compilation of its financial statements and selection of an independent accountant?	lit,	2 c	x
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule 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 Single Audit Act and OMB Circular A-133?		3 a	Х
ŀ	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required a	udıt		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 b	
BAA			Form 99	0 (2014)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is

OMB No 1545-0047 2014

Open to Public finspection -

Department of the Treasury Internal Revenue Service

(C)

(D)

(E)

Total

at www.irs.gov/form990. Name of the organization Employer identification number MEXICAN AMERICAN CATHOLIC COLLEGE, INC 74-1712528 Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's 4 name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 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 9 June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one 11 or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must** complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations g Provide the following information about the supported organization(s) (i) Name of supported organization (II) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (iv) is the organization listed (v) Amount of monetary (vi) Amount of other support (see instructions) support (see instructions) in your governing document? Yes No (A) (B)

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

Schedule A (Form 990 or 990-EZ) 2014

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

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

Se	ection A. Public Support						
be	llendar year (or fiscal year ginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
•	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')						
2	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						
Se	ction B. Total Support						
	endar year (or fiscal year ginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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 VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activi	ities, etc (see inst	ructions)			. 12	
13	First five years. If the Form 990 is forganization, check this box and	or the organization stop here .	's first, second, thir	rd, fourth, or fifth ta	x year as a section	501(c)(3)	▶□
	ction C. Computation of Pub						
	Public support percentage for 20	•			•• •••	14	<u>%</u>
	Public support percentage from 2				•••	15	%
16	a 33-1/3% support test — 2014. If t and stop here. The organization of	he organization d qualifies as a publ	ld not check the b licly supported or	oox on line 13, and ganization .	d the line 14 is 33	3-1/3% or more, ch 	neck this box
ı	33-1/3% support test — 2013. If the and stop here. The organization	ne organization die qualifies as a pub	d not check a box licly supported or	on line 13 or 16a ganization	, and line 15 is 3.	3-1/3% or more, cl	heck this box
17 a	a 10%-facts-and-circumstances tes or more, and if the organization in the organization meets the 'facts-	neets the 'facts-ar	nd-circumstances'	test, check this b	ox and stop here	. Explain in Part V	∕l how
	o 10%-facts-and-circumstances test or more, and if the organization no organization meets the 'facts-and	neets the 'facts-ar -circumstances' te	nd-circumstances' est. The organizat	test, check this b ion qualifies as a	ox and stop here publicly supported	. Explain in Part V d organization	'I how the □
18	Private foundation. If the organiza	ation did not chec	k a box on line 13	3, 16a, 16b, 17a, d	or 17b, check this	box and see instr	uctions >
ΔΔ					Sche	dule A (Form 990)	or 990-FZ) 2014

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					<u>-</u>	
	ndar year (or fiscal yr beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants ')						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
7 8	Total. Add lines 1 through 5. a Amounts included on lines 1, 2, and 3 received from disqualified persons						
ŀ	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						
•	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
	tion B. Total Support						
	ndar year (or fiscal yr beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
_	Amounts from line 6						
ŀ	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						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
	Total support. (Add lines 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) <u>►</u> □
	tion C. Computation of Pul			10		· · · · · · · · · · · · · · · · · · ·	
	Public support percentage for 20			ne 13, column (f))		15	<u>%</u>
	Public support percentage from 2					16	%
	tion D. Computation of Inv						
17	Investment income percentage for			-	mn (f))	17	8
18	manage ii					18	%
	33-1/3% support tests – 2014. If is not more than 33-1/3%, check	this box and stop	o here. The orgar	iization qualifies a	as a publicly suppo	orted organization	▶
	33-1/3% support tests — 2013. If line 18 is not more than 33-1/3%	, check this box a	and stop here. T h	e organization qu	alifies as a publicl	y supported organ	-1/3%, and ization ►
20	Private foundation. If the organize	zation did not che	ck a box on line	14, 19a, or 19b, c	heck this box and	see instructions	▶ []

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

se	ction A. Ali Supporting Organizations	ı		
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2	:	
3	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below	3a	i	
	b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination	3b		
	c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use	3c		
4	a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
	b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
	c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5	5a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
	b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
	c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		<u> </u>
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7° If 'Yes,' complete Part I of Schedule L (Form 990)	8		
9	a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI	9a		
	b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI	9ь		
	c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI	9с		
10	Da Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer (b) below	10a	_	
	b Did the organization, have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10h		

	•			
	dule A (Form 990 or 990-EZ) 2014 MEXICAN AMERICAN CATHOLIC COLI			12528 Page
Pa	Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ganizati	ions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on other Type III non-functionally integrated supporting organizations must complete.	Novembe ete Sectio	r 20, 1970 See instruct ons A through E	ions. All
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		-
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for shortax year or assets held for part of year)	rt		
	Average monthly value of securities	1a		
l	Average monthly cash balances	1b	_	
	Fair market value of other non-exempt-use assets	1c		
•	Total (add lines 1a, 1b, and 1c)	1d	··-	
	Discount claimed for blockage or other factors (explain in detail in Part VI)			,
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount	ı	J - 487 August	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	- 111	
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4	e w No a war a	1
5	Income tax imposed in prior year	5	er,	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	`	

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Schedule A (Form 990 or 990-EZ) 2014

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

Page 7

MEXICAN AMERICAN CATHOLIC COLLEGE, INC.

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) S	upporting Organiza	tions (continued)	
	ction D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt p			
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	s,		
3	Administrative expenses paid to accomplish exempt purposes of s	supported organizations		
4	Amounts paid to acquire exempt-use assets .	<u> </u>	<u> </u>	
5	Qualified set-aside amounts (prior IRS approval required)	•		
6	Other distributions (describe in Part VI) See instructions.			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organization Part VI) See instructions	tion is responsive (provide	details	
9	Distributable amount for 2014 from Section C, line 6.			
10	Line 8 amount divided by Line 9 amount			
Sec	tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required — see instructions)			
3	Excess distributions carryover, if any, to 2014	1. 对政策制度整个	· 建筑 (1) (1) (1) (1)	Friday 1
a	Marie and the second of the se			
h			TOPS THE PROPERTY LAND	Pasteria it.
c	The state of the s			
d	POSSESSION AND REPORT OF THE PROPERTY OF THE P			THE PERMIT
e	From 2013	等的語言。	1961年1961年1964年	少数10 工作数 0
1	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount		COLUMN TO SERVE	
i	Carryover from 2009 not applied (see instructions)		多數字學數學學	2007年1月1日
	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
	Distributions for 2014 from Section D,	·利克克拉拉克 (1)	High 18 Barbara C	
	line 7 [·] \$			
a	Applied to underdistributions of prior years			ELECTRICAL CONTROL
	Applied to 2014 distributable amount	人。 12. 12. 12. 12. 12. 12. 12. 12. 12. 12.		
	Remainder Subtract lines 4a and 4b from 4 .	1	FAR SECRETARY	<u> </u>
5	Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6	Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			and the second of the second of
7	Excess distributions carryover to 2015. Add lines 3j and 4c		此题:A "在这里上"	WEST STATES
	Breakdown of line 7	Chirago Phi Air.		CONTRACTOR OF THE PARTY OF THE
	Production of the second of th		WELDER DELINE	
<u>_</u>			APT TUESCE SE	
	Barring and the Control of the Contr	SEMANDURE!		
	Excess from 2013		The state of the s	Telegraphic de la companya de la com
	Excess from 2014			
_		International Control of the Control of the Control	Butter and decimal and a transmission of	

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Schedule A (Form 990 or 990-EZ) 2014

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

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.

OMB No 1545-0047 2014

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection

Haine	or the organization				Employer	identification	n number
	MEXICAN AMERICAN CATHOLIC	COLLEGE, INC			74 17	10500	
Par		<u> </u>	· Similar Fu	nde or Acc	74-17	12528_	
rai	Complete if the organization ans	wered 'Yes' to Form 990, F	Part IV, line	6.	ounts.		
		(a) Donor advised fur	nds	(b) F	unds and	other acc	counts
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						· · · · · · ·
5	Did the organization inform all donors and do are the organization's property, subject to the	nor advisors in writing that the as organization's exclusive legal co	ssets held in de introl?	onor advised	funds [Yes	☐ No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	rs, and donor advisors in writing of the donor or donor advisor, o	that grant fund or for any other	ds can be use purpose con	ed only iferring	Yes	□No
Par					[168	NO
Par	Conservation Easements. Complete if the organization ans	wered 'Yes' to Form 990 F	Part IV line	7			
1	Purpose(s) of conservation easements held by	the organization (check all that	apply)				
	Preservation of land for public use (e g , r		Preservation of	of a historical	ly import	ant land a	rea
	Protection of natural habitat	<u> </u>	Preservation of	of a certified l	historic s	tructure	
	Preservation of open space		•				
2	Complete lines 2a through 2d if the organization hast day of the tax year.	neld a qualified conservation contrib	oution in the for	m of a conserv	ation eas	sement on	the
	T. I			<u> </u>	eld at the	e End of t	he Tax Year
	Total number of conservation easements			2 a			
	 Total acreage restricted by conservation ease Number of conservation easements on a certi 		(0)	2 b			
			• •	2 c			
	Number of conservation easements included is structure listed in the National Register			2 d			
3	Number of conservation easements modified, trar tax year ▶		terminated by t	he organizatio	n during t	he	
4	Number of states where property subject to conse						
5	Does the organization have a written policy re and enforcement of the conservation easement	nts it holds?		_		Yes	No
6	Staff and volunteer hours devoted to monitoring,				r		
7	Amount of expenses incurred in monitoring, insper ▶\$	cting, and enforcing conservation e	easements durin	ng the year			
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requ	irements of se	ction 170(h)(4)(B)(ı)	Yes	No
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote	conservation easements in its reve to the organization's financial sta	enue and expen Itements that c	se statement, describes the	and bala organiza	 nce sheet, tion's acc	and ounting for
Par	conservation easements t III Organizations Maintaining Colle	ctions of Art, Historical Tr	easures, or	Other Sim	ilar As	sets.	
	Complete if the organization ans	wered 'Yes' to Form 990, F	Part IV, line	8.			
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 finar	ld for public exhibition, education, o	or research in fi	nue statemer urtherance of p	nt and ba oublic ser	lance she	et works of de,
b	If the organization elected, as permitted under historical treasures, or other similar assets held for following amounts relating to these items	SFAS 116 (ASC 958), to report or public exhibition, education, or re	ın its revenue esearch in fürthe	statement ar erance of publi	nd baland c service,	e sheet w provide th	orks of art, ne
	(i) Revenue included in Form 990, Part VIII, I	ine 1			▶ \$	3	2,413.
	(ii) Assets included in Form 990, Part X				► \$	3	770,069.
	If the organization received or held works of art, hamounts required to be reported under SFAS	116 (ASC 958) relating to these i	assets for finan items	ıcıal gaın, prov	ride the fo	llowing	
	Revenue included in Form 990, Part VIII, line	1			► \$		
b	Assets included in Form 990, Part X				▶ \$	3	_

Part III Organizations Maint	aining Collection	ons of Art, Histo	<u>orical</u>	Treasures, or	Other Similar Ass	sets (continued)
3 Using the organization's acquisition items (check all that apply)	on, accession, and o	ther records, check a	any of th	ne following that ar	e a significant use of its	collection
a Public exhibition		d Loan	or exch	nange programs		
b X Scholarly research		e 🛚 X Other	Lik	orary books	used by stude	nts
c X Preservation for future gene	erations	_				
4 Provide a description of the organ Part XIII See Part XII	I		-	•		
5 During the year, did the organiz to be sold to raise funds rather						Yes X No
Part IV Escrow and Custodi line 9, or reported ar	al Arrangemen amount on Fo	ts. Complete if rm 990, Part X,	the or line 2	ganızatıon an 21.	swered 'Yes' to Fo	rm 990, Part IV,
1 a is the organization an agent, tri on Form 990, Part X?	ustee, custodian, o	r other intermediary	y for co	entributions or oth	ner assets not included	☐ Yes ☐ No
b If 'Yes,' explain the arrangement	nt in Part XIII and	complete the follow	ung tab	le		□
333				-		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	amount on Form 9	90, Part X, line 21,	, for es	crow or custodial	account liability?	Yes No
b If 'Yes,' explain the arrangement	nt in Part XIII Che	ck here if the expla	nation	has been provide	d in Part XIII	
Part V Endowment Funds.	Complete if the	organization ar	nswer	ed 'Yes' to Fo	rm 990, Part IV, III	ne 10.
	(a) Current year	(b) Prior yea	ar	(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance	794,41		963.	1,479,57	7. 1,827,007	. 2,209,457.
b Contributions	37,27	2. 2,7	708.	2,57	6. 3,064	. 3,284.
c Net investment earnings, gains and losses	59,64	9. 64,	740.	54,81	0. 65,455	. 153,723.
d Grants or scholarships.						
 Other expenditures for facilities and programs 	1,00	0. 220,0	000.	590,00	0. 415,949	. 539,457.
f Administrative expenses						
g End of year balance	890,33			946,96		. 1,827,007.
2 Provide the estimated percenta	-		ne 1g, d	column (a)) held	as	
a Board designated or quasi-endow		<u>37.00</u> %				
b Permanent endowment	45.00 %					
c Temporarily restricted endowme		3.00 %				
The percentages in lines 2a, 2b	, and 2c should ed	ual 100%.				
3a Are there endowment funds not in	the possession of t	ne organization that	are held	d and administered	I for the	
organization by						Yes No
(i) unrelated organizations						3a(i) X
(ii) related organizations	araanimatiana lista	۵ المستندة م	والمام والم	- D2		3a(ii) X
b If 'Yes' to 3a(ii), are the relatedDescribe in Part XIII the intended					L VIII	3b
		inization's endowm	ent iun	ds. See Par	r XIII	
Part VI Land, Buildings, and Complete if the organ		ed 'Yes' to Forr	n 990	, Part IV, line	11a. See Form 99	0, Part X, line 10.
Description of property	(a) (Cost or other basis (investment)		Cost or other asis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land				216,062.		216,062.
b Buildings				4,839,318.	2,582,585.	2,256,733.
c Leasehold improvements				451,710.	205,494.	246,216.
d Equipment				362,399.	255,389.	107,010.
e Other				530,766.	514,958.	15,808.
Total. Add lines 1a through 1e (Colu	mn (d) must equal	Form 990, Part X,	column		•	2,841,829.
BAA					Sched	dule D (Form 990) 2014

74-1712528

Page 2

Schedule D (Form 990) 2014 MEXICAN AMERICAN CATHOLIC COLLEGE, INC.

Part VII	Investments - Other Securities.		N/A	
	Complete if the organization answered			
	cription of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of	-year market value
	cial derivatives			
	y-held equity interests	-		_
(3) Other				
$\frac{(A)}{(D)}$				
(B)				
(C)				
(D) (E)				
(F)				
(G)				
(H)				
<u>(l)</u>		-		
	mn (b) must equal Form 990, Part X, column (B) line 12)			
	I Investments – Program Related.		N/A	
	Complete if the organization answered			
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-	of-year market value
(1)				
(2)				·
(3)				
<u>(4)</u> (5)				
(6)				
(7)				
(8)	- 4			
(9)				
(10)		17.00		
Total. (Colu	mn (b) must equal Form 990, Part X, column (B) line 13)			
Part IX	Other Assets.	L'Vas' ta Farm 000	Dort IV June 11d See Form Of	O Dort V line 15
	Complete if the organization answered	scription	, Part IV, lifle 11d. See Form 99	(b) Book value
(1) Lil	orary Collection	5011011		770,069.
(2)				,
(3)				
(4)				<u></u>
(5)				
<u>(6)</u> (7)				
(8)			-	
(9)				
(10)				
Total. (Co	olumn (b) must equal Form 990, Part X, column (b	3), line 15)	>	770,069.
Part X	Other Liabilities.			
	Complete if the organization answered 'Yes' to Fo		e or 11f. See Form 990, Part X, line 25	
(1) Fed	(a) Description of liability eral income taxes	(b) Book value		
	ency Funds Held	3,19	9	
(3)		- 0/13		
(4)				
(5)				
(6)				
(7)				
<u>(8)</u> <u>(9)</u>		+	- 	
(10)			 	
(11)				
	mn (b) must equal Form 990, Part X, column (B) line 25.)	▶ 3,19	9.	
2. Liability f	or uncertain tax positions. In Part XIII, provide the text of the foo	otnote to the organization's fir	nancial statements that reports the organization's	lability for uncertain
tax positions	under FIN 48 (ASC 740) Check here if the text of the footnote h	nas been provided in Part XIII		

·				
Schedule D (Form 990) 2014 MEXICAN AMERICAN CATHOLIC COLLEGE,	INC.	74-	-1712528	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statement	ts With Revenu	e per Ret	turn.	
Complete if the organization answered 'Yes' to Form 990, Pa	art IV, line 12a.			
1 Total revenue, gains, and other support per audited financial statements			1 2	2,450,357.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12			** 12 *** 34	
a Net unrealized gains (losses) on investments	2 a	5,600.		
b Donated services and use of facilities	2 b 2	6,591.	(144.48) (174.48)	
c Recoveries of prior year grants.	2 c			
d Other (Describe in Part XIII)	2 d			
e Add lines 2a through 2d			2 e	32,191.
3 Subtract line 2e from line 1			3 2	2,418,166.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		7 2	13.2.2 14.4.4	
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		12. a 12. a	
b Other (Describe in Part XIII)	4 b	144		
c Add lines 4a and 4b			4 c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		_	5 2	2,418,166.
Part XII Reconciliation of Expenses per Audited Financial Statemen	nts With Expen	ses per F	Return.	
Complete if the organization answered 'Yes' to Form 990, Pa	art IV, line 12a.			
1 Total expenses and losses per audited financial statements			1 2	2,056,900.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		<u> </u>		
a Donated services and use of facilities	2a 2	6,591.	A STATE OF THE STA	
b Prior year adjustments	2 b			
c Other losses	2 c		vijekajā a - militarija	
d Other (Describe in Part XIII)	2 d			
e Add lines 2a through 2d			2 e	26,591

Part XIII Supplemental Information.

3 Subtract line 2e from line 1

b Other (Describe in Part XIII) **c** Add lines **4a** and **4b**

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

2,030,309.

2,030,309.

Part III, Line 4 - Description Of Organization Collections & How Furthers Exempt Purpose

The College's library collection is used by students to futher their studies that lead to Bachelor of Arts and/or Master of Arts degree in Pastoral Ministry and to assist in their studies of Pastoral English and Spanish courses which compliments its mission.

Part V, Line 4 - Intended Uses Of Endowment Fund

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

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

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) 2014

TEEA3304L 10/28/14

RattXIII Supplemental Information (continued)

Part V, Line 4 - Intended Uses Of Endowment Fund (continued)

and building of the student body.

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 2014

Department of the Treasury Internal Revenue Service Name of the organization

MEXICAN AMERICAN CATHOLIC COLLEGE, INC.

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

Open to Public Inspection

Employer identification number

74-1712528

Ŗа	<u>祝信</u>			
			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 is a bonafide religious school that publicizes its racially nondiscriminatory policy on its circulars including its annual Academic Catalog, its Student Handbook, and the organization's website. The organization meets the exemption of Rev. Proc. 75-50, 1975-2 C.B. 587, section 4.03, subsection 2(a). Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff?	4 a	X	
		4 a		
	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4 b	Х	
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Х	
	d Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Х	
	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		X
	c Employment of faculty or administrative staff?	5 c		Х
	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	-1.4	Х
	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?	6a		X
	b Has the organization's right to such aid ever been revoked or suspended?	6 b		X
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	

Page 2

Schedule E (Form 990 or 990-EZ) (2014) MEXICAN AMERICAN CATHOLIC COLLEGE, INC. 74-1712528

Partill Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information (see instructions).

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, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule L (Form 990 or 990-EZ) and its instructions is

2014

OMB No. 1545-0047

Open To Public

Department of the Treasury Internal Revenue Service

(6)

at www.irs.gov/form990.

Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

Name of the organization Employer identification number

MEXICAN AMERICAN CATHOLIC COLLEGE, INC

74-1712528

	Complete if the organization a	answered 'Yes' on Form 990, Part IV, line 25a	i or 25b, or Form 990-EZ, Part V, line 4	0b		
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)						
(5)						

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958

Þ\$ **►**\$

Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

Loans to and/or From Interested Persons.

Complete if the organization answered 'Yes' on Form 990-EZ, Part 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	fror	an to or n the ızatıon?	(e) Original principal amount	(f) Balance due	(g) In (default?	(h) Ap by bo comm	proved ard or uttee?	(i) Wi agreei	ritten ment?
			То	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)					·	-			<u> </u>			
Total					▶ \$			J	-			*

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)					
(2)					
(3)					1
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

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

Schedule L (Form 990 or 990-EZ) 2014

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing organization revenues	
				Yes	No
(1) Very Rev. Jeff Pehl	Board Member	88,644.	Purchases of Services		X
(2) Archbishop Siller	Board Member	190,500.	Tuition & Pastoral		X
(3) Dr. Glenn E. James	Board Member	347,850.	Degree Based(PMIN)		X
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)				·	

Partive 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.

2014

Open to Public

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 MEXICAN AMERICAN CATHOLIC COLLEGE, INC.

Employer identification number

74-1712528

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

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

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

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

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

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

Form 990, Part IX, Line 24e Other Expenses

(A)	(B)	(C)	(D)
	Program	Management	
<u> </u>	<u>Services</u>	<u>& General</u>	<u>Fundraising</u>

Allocation of Plant/Facility Auto Expense

246,367.

-249,516.

3,149.

1,205.

1,116.

89.

Name of the organization

MEXICAN AMERICAN CATHOLIC COLLEGE, INC.

Employer identification number
74-1712528

Form 990, Part IX, Line 24e (continued) Other Expenses

		(A)	(B) Program	(C) Management	(D)
		<u> Total</u>	_ Services	& General	<u>Fundraising</u>
Bad Debt Expense Bank Charges Bishop's Reception Expense Community Outreach Donated Books	:	15,000. 5,581. 3,061. 1,350.	15,000. 5,474. 3,061. 1,350.	107.	
Donated Inventory Dues & Subscriptions Educational Materials		6,231. 6,256. 3,694.	6,231. 2,187. 3,694.	3,035.	1,034.
Equipment and Furnishings Germania Property		32,837.	9,647.	23,102.	88.
Graduation Expenses HM21st Century Homelitics Hospitality Housekeeping Supplies Library Resources		254. 8,353. 468. 12,249. 5,622. 578.	254. 8,353. 468. 12,104. 5,225. 578.	145. 397.	
MACC Board Maintenance and Grounds Miscellaneous Office Supplies		1,987. 18,636. 3,945. 7,426.	4,732.	1,987. 18,636. 3,945.	530.
Payroll/Human Resources Postage and Shipping Printing and Publications		30,703. 5,856. 12,021.	19,031. 779. 8,823.	2,164. 8,372. 741. 650.	3,300. 4,336. 2,548.
Professional Fees Public Relations Repairs & Maintenance Security		27,973. 7,156. 10,176. 2,975.	11,198. 364.	7,470. 1,512. 10,176. 2,975.	9,305. 5,280.
Solicitation Staff Development Technology Uncollected		11,250. 5,751. 701.	4,363. 701.	959.	11,250. 429.
	Total	\$ 249,295.	\$ 369,984.	\$ -162,027.	\$ 41,338.